Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Document Page 1 of 71

| Fill in this information to identify your case: | | |
|---|-------------------------------|---------------------------------|
| United States Bankruptcy Court for the: | | |
| WESTERN DISTRICT OF MISSOURI | - | |
| Case number (if known) | Chapter you are filing under: | |
| | Chapter 7 | |
| | ☐ Chapter 11 | |
| | ☐ Chapter 12 | |
| | ☐ Chapter 13 | Check if this an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | | |
|----|--|---|---|--|
| | | About Debtor 1: | | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | | |
| | Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee. | Everett First name Levi Middle name Purvis Last name and Suffix (Sr., Jr., II, III) | _ | Christina First name Mae Middle name Purvis Last name and Suffix (Sr., Jr., II, III) |
| 2. | All other names you have used in the last 8 years Include your married or maiden names. | | | |
| 3. | Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN) | xxx-xx-5404 | | xxx-xx-0677 |

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Debtor 1 **Everett Levi Purvis**Debtor 2 **Christina Mae Purvis**

Case number (if known)

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|----|--|---|---|
| 4. | Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names | ■ I have not used any business name or EINs. Business name(s) EINs | ■ I have not used any business name or EINs. Business name(s) EINs |
| 5. | Where you live | 840 South Robberson Avenue, Apt. B-110-A Springfield, MO 65806 | If Debtor 2 lives at a different address: |
| | | Number, Street, City, State & ZIP Code | Number, Street, City, State & ZIP Code |
| | | Greene | Overt |
| | | County | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address. |
| | | Number, P.O. Box, Street, City, State & ZIP Code | Number, P.O. Box, Street, City, State & ZIP Code |
| 6. | Why you are choosing this district to file for bankruptcy | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) | Check one: Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. I have another reason. Explain. (See 28 U.S.C. § 1408.) |

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Debtor 2 **Christina Mae Purvis** Case number (if known) Tell the Court About Your Bankruptcy Case Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When Case number District When District Case number When District Case number 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Relationship to you Debtor When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12. Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this bankruptcy petition.

Debtor 1

Everett Levi Purvis

Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Document Page 4 of 71 Debtor 1 **Everett Levi Purvis** Debtor 2 **Christina Mae Purvis** Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time No. Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any

14. Do you own or have any

property that needs immediate attention?

> For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?

If immediate attention is needed, why is it needed?

Where is the property?

Number, Street, City, State & Zip Code

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| | Official files Fair Vic | |
|----------|-------------------------|------------------------|
| Debtor 2 | Christina Mae Purvis | Case number (if known) |
| Debtor 1 | Everett Levi Purvis | |

Part 5:

Explain Your Efforts to Receive a Briefing About Credit Counseling

Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about credit |
|--|
| counseling because of: |

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Document Page 6 of 71

| Part (| | | | Case number (if known) | | | | | |
|--------|---|-----------------------------|---|--|---------------|---|--|--|--|
| | 6: Answer These Questi | ons for Repor | ting Purposes | | | | | | |
| | What kind of debts do you have? | | your debts primarily consunvidual primarily for a personal, | | | e defined in 11 U.S.C. § 101(8) as "incurred by an | | | |
| | | | ☐ No. Go to line 16b. | | | | | | |
| | | | Yes. Go to line 17. | | | | | | |
| | | | your debts primarily busines ney for a business or investmen | | | debts that you incurred to obtain e business or investment. | | | |
| | | | No. Go to line 16c. | | | | | | |
| | | | Yes. Go to line 17. | | | | | | |
| | | 16c. Sta | te the type of debts you owe the | at are not consumer o | debts or bus | siness debts | | | |
| | Are you filing under Chapter 7? | □ No. I ar | n not filing under Chapter 7. Go | to line 18. | | | | | |
| i | Do you estimate that after any exempt property is excluded and administrative expenses | | paid that funds will be available | | | property is excluded and administrative expense ditors? | | | |
| | are paid that funds will be available for distribution to unsecured creditors? | | Yes | | | | | | |
| 18. | How many Creditors do | □ 1-49 | | 1 ,000-5,000 | | 2 5,001-50,000 | | | |
| | you estimate that you owe? | 50-99 | | 5001-10,000 | | ☐ 50,001-100,000 | | | |
| | | □ 100-199 □ 200-999 | | □ 10,001-25,000 | | ☐ More than100,000 | | | |
| | How much do you | □ \$0 - \$50,0 | 00 | □ \$1,000,001 - \$10 |) million | ☐ \$500,000,001 - \$1 billion | | | |
| | estimate your assets to be worth? | □ \$50,001 - | | □ \$10,000,001 - \$5 | | \$1,000,000,001 - \$10 billion | | | |
| | | ■ \$100,001 · □ \$500,001 · | | □ \$50,000,001 - \$1 □ \$100,000,001 - \$ | | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | |
| | How much do you | □ \$0 - \$50,0 | | □ \$1,000,001 - \$10 |) million | □ \$500,000,001 - \$1 billion | | | |
| | estimate your liabilities to be? | □ \$50,001 - | | □ \$10,000,001 - \$5 | | \$1,000,000,001 - \$10 billion | | | |
| | | □ \$100,001 · ■ \$500,001 | | □ \$50,000,001 - \$1 □ \$100,000,001 - \$ | | ☐ \$10,000,000,001 - \$50 billion ☐ More than \$50 billion | | | |
| Part | 7: Sign Below | | | | | | | | |
| For y | /ou | I have examir | ed this petition, and I declare u | under penalty of perjui | ry that the i | information provided is true and correct. | | | |
| | | | | | | gible, under Chapter 7, 11,12, or 13 of title 11, d I choose to proceed under Chapter 7. | | | |
| | | | represents me and I did not pa ave obtained and read the notic | | | is not an attorney to help me fill out this b). | | | |
| | | I request relie | f in accordance with the chapte | er of title 11, United St | ates Code, | s, specified in this petition. | | | |
| | | bankruptcy ca and 3571. | se can result in fines up to \$25 | 50,000, or imprisonme | ent for up to | ney or property by fraud in connection with a p 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519 | | | |
| | | /s/ Everett I | | | | a Mae Purvis ae Purvis | | | |
| | | Signature of I | | | nature of D | | | | |
| | | Executed on | September 19, 2018 MM / DD / YYYY | Exe | ecuted on | September 19, 2018 MM / DD / YYYY | | | |

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| 5.1.4 | Francii I ani Brand | _ | | Document | Page 7 o | f 71 | | | | |
|----------------------|--|-----------------|-------------------|-----------------------|-------------------|------------------------|---|--|--|--|
| Debtor 1 Debtor 2 | Everett Levi Purvi Christina Mae Pur | - | | | | Case number (if known) | | | | |
| | | | | | | | | | | |
| • | attorney, if you are ed by one | under Chap | ter 7, 11, 12, | or 13 of title 11, Un | ited States Code, | and have | e informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b) | | | |
| | not represented by ey, you do not need a page. | and, in a cas | se in which § | | | | wledge after an inquiry that the information in the | | | |
| | | /s/ Byron I | K. Shive | | | Date | September 19, 2018 | | | |
| | | Signature of | Attorney for | Debtor | | | MM / DD / YYYY | | | |
| | | Byron K. S | Shive 6036 | 7 | | | | | | |
| | | Printed name | | | | | | | | |
| | | Shive Law | / Firm | | | | | | | |
| | | Firm name | | | | | | | | |
| | | PO Box 77 | 77 | | | | | | | |
| | | Bolivar, M | | | | | | | | |
| | | Number, Street, | City, State & ZIP | Code | | | | | | |
| | | Contact phone | (417) 770 | -0003 | Em | ail address | byron@shivelaw.com | | | |

60367 MO Bar number & State Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Document Page 8 of 71

B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Missouri

| In r | Everett Levi Purvis Christina Mae Purvis | | Case No |). |
|------|--|--|--|---|
| | - Chinomia indo i di vio | Debtor(s) | Chapter | 7 |
| | DISCLOSURE OF COMPENS | ATION OF ATTO | RNEY FOR I | DEBTOR(S) |
| 1. | Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), compensation paid to me within one year before the filing of be rendered on behalf of the debtor(s) in contemplation of o | f the petition in bankruptc | y, or agreed to be pa | id to me, for services rendered or to |
| | For legal services, I have agreed to accept | | \$ | 1,200.00 |
| | Prior to the filing of this statement I have received | | \$ | 1,200.00 |
| | Balance Due | | \$ | 0.00 |
| 2. | \$335.00 of the filing fee has been paid. | | | |
| 3. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | The source of compensation to be paid to me is: | | | |
| | ☐ Debtor ■ Other (specify): Compens | sation paid in full. | | |
| 5. | ■ I have not agreed to share the above-disclosed compens | ation with any other perso | n unless they are me | embers and associates of my law firm. |
| | | | | |
| | ☐ I have agreed to share the above-disclosed compensatio copy of the agreement, together with a list of the names | | | |
| 6. | In return for the above-disclosed fee, I have agreed to rende | er legal service for all aspe | cts of the bankruptc | y case, including: |
| | a. Analysis of the debtor's financial situation, and rendering b. Preparation and filing of any petition, schedules, statemed c. Representation of the debtor at the meeting of creditors at d. [Other provisions as needed] Negotiations with secured creditors to reduce reaffirmation agreements and applications 522(f)(2)(A) for avoidance of liens on house | ent of affairs and plan which and confirmation hearing, uce to market value; e. as needed; preparatio | ch may be required; and any adjourned h xemption plannin | earings thereof; g; preparation and filing of |
| 7. | By agreement with the debtor(s), the above-disclosed fee do Representation of the debtors in any disch | | | ary proceeding. |
| | | CERTIFICATION | | <u> </u> |
| this | I certify that the foregoing is a complete statement of any agbankruptcy proceeding. | greement or arrangement f | or payment to me fo | r representation of the debtor(s) in |
| 3 | September 19, 2018 | /s/ Byron K. Shi | | |
| | Date | Byron K. Shive Signature of Attorn | | |
| | | Shive Law Firm | , | |
| | | PO Box 777 Bolivar, MO 656 | :13 | |
| | | (417) 770-0003 | Fax: (417) 727-00 | 15 |
| | | byron@shivela | | |
| | | Name of law firm | | |

800 South 830 S. Robberson Ave. Springfield MO 65806

AAFES
Attention: Bankruptcy
PO Box 650060
Dallas TX 75265

Advance Financial 24/7 Attn: Bankruptcy Dept. 100 Oceanside Drive Nashville TN 37204

Always Travel With Us 2626 E. Oakland Park Blvd. Fort Lauderdale FL 33306

Arquitt Pediatric Dentistry 3045 S. Delaware Ave. #B Springfield MO 65804

AT&T ATTN: Bankruptcy Dept. 4331 Communications Drive Floor 4W Dallas TX 75211

BluCurrent Credit Union 1770 W. Sunset Street Springfield MO 65807

Bolivar Smiles Dentistry 1300 N. Oakland Suite B Bolivar MO 65613

Brent E. Cloyd Penny L. Cloyd 4165 S. 135th Road Bolivar MO 65613

Cash Central 6785 Bobcat Way Suite 200 Dublin OH 43016-1443 Check 'N Go Attn: Bankruptcy Dept. 7755 Montgomery Road Suite 400 Cincinnati OH 45236

Citibank/Sears
Attn: Bankruptcy
PO Box 6275
Sioux Falls SD 57117

Citizens Memorial Clinics Attn: Bankruptcy Dept. PO Box 939 Bolivar MO 65613-0939

Citizens Memorial Hospital 1500 N. Oakland Avenue Bolivar MO 65613

CNU of Missouri LLC d/b/a CashNetUSA 175 West Jackson Blvd. Suite 1000 Chicago IL 60604

Comenity Bank/Younkers Attn: Bankruptcy Dept. PO Box 182125 Columbus OH 43218

Compass Health Pharmacy PO Box 803919 Kansas City MO 64180-3919

CoxHealth Attn: Bankruptcy Dept. 1423 N. Jefferson Ave. Springfield MO 65802

Credit Acceptance 25505 West 12 Mile Road Suite 3000 Southfield MI 48034 DIRECTV Attn: Bankruptcy Dept. 4331 Communications Drive Floor 4W Dallas TX 75211

FedLoan Servicing Attn: Bankruptcy PO Box 69184 Harrisburg PA 17106

Fingerhut Attn: Bankruptcy PO Box 1250 Saint Cloud MN 56395

Flagstar Bank Attn: Bankruptcy 5151 Corporate Drive Troy MI 48098

Foursight Capital, LLC. Attn: Bankruptcy PO Box 45026 Salt Lake City UT 84145

Garretson Trash Service 1117 South Lillian Bolivar MO 65613

John T. Tweedie D.C. 211 N. Main Avenue Bolivar MO 65613-1519

Kohl's/Capital One Kohl's Credit PO Box 3120 Milwaukee WI 53201

LendingPoint LLC, Attn: Bankruptcy 1201 Roberts Blvd, Suite 200 Kennesaw GA 30144 McCarthy, Burgess & Wolff 26000 Cannon Road Cleveland OH 44146

Midstate Plumbing & Heating Inc. 2120 2nd Avenue S Fort Dodge IA 50501

Nature's Rain Lawn Care PO Box 78 Buffalo MO 65622

PayPal Credit Attn: Bankruptcy Dept. PO Box 71202 Charlotte NC 28272-1202

RISE Attn: Bankruptcy PO Box 101808 Fort Worth TX 76185

Royal Oaks Hospital Attn: Bankruptcy Dept. 307 North Main Windsor MO 65360

Southwest Electric Coop Attn: Bankruptcy Dept. 1023 S. Springfield Ave. Bolivar MO 65613

Sunshine Eye Clinic 1441 E. Sunshine Springfield MO 65804-1211

Synchrony Bank/Lowe's Attn: Bankruptcy Dept PO Box 965060 Orlando FL 32896

Synchrony Bank/Select Comfort Attn: Bankruptcy Dept PO Box 965060 Orlando FL 32896 Synchrony Bank/Walmart Attn: Bankruptcy Dept PO Box 965060 Orlando FL 32896

USAA Federal Savings Bank Attn: Bankruptcy Dept. 10750 McDermott Freeway San Antonio TX 78288

USSA Federal Saving Bank/Nationstar Attn: Bankruptcy 8950 Cypress Waters Blvd, Ste B Coppell TX 75019

Webster County Treasurer Jan Messerly 701 Central Avenue Fort Dodge IA 50501

Wells Fargo Dealer Services Attn: Bankruptcy Dept. PO Box 19657 Irvine CA 92623 Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Document Page 14 of 71

United States Bankruptcy Court Western District of Missouri

| In re | Everett Levi Purvis Christina Mae Purvis | | Case No. | |
|-------|---|-----------------------------|----------|---|
| | | Debtor(s) | Chapter | 7 |
| | | | DIV | |
| | | VERIFICATION OF MAILING MAT | KIA | |

The above-named Debtor(s) hereby verifies that the attached list of creditors is true and correct to the best of my knowledge and includes the name and address of my ex-spouse (if any).

| Date: | September 19, 2018 | /s/ Everett Levi Purvis | |
|-------|--------------------|--------------------------|--|
| | | Everett Levi Purvis | |
| | | Signature of Debtor | |
| Date: | September 19, 2018 | /s/ Christina Mae Purvis | |
| | | Christina Mae Purvis | |
| | | Signature of Debtor | |

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| | | Docume | ent Page 15 of 7 | 1 | | |
|---------------------|-------------------------|--------------------|------------------|---|--------------------------------------|---|
| Fill in this inform | nation to identify your | case: | | | | |
| Debtor 1 | Everett Levi Purv | ris | | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 | Christina Mae Pu | rvis | | | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | | | |
| United States Bar | nkruptcy Court for the: | WESTERN DISTRICT (| OF MISSOURI | | | |
| Case number | | | | | ☐ Check if this is ar amended filing | 1 |
| | | | | | • | |
| United States Bar | | | | | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| | | Your a Value o | ssets of what you own |
|-----|--|-------------------|--------------------------|
| 1. | Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | \$ | 360,000.00 |
| | 1b. Copy line 62, Total personal property, from Schedule A/B | \$ | 55,010.00 |
| | 1c. Copy line 63, Total of all property on Schedule A/B | \$ | 415,010.00 |
| Par | t 2: Summarize Your Liabilities | | |
| | | | abilities it you owe |
| 2. | Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$ | 437,882.00 |
| 3. | Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$ | 0.00 |
| | 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$ | 93,330.42 |
| | Your total liabilities | \$ | 531,212.42 |
| Par | 3: Summarize Your Income and Expenses | | |
| 4. | Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$ | 4,209.45 |
| 5. | Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$ | 4,184.93 |
| Par | 4: Answer These Questions for Administrative and Statistical Records | | |
| 6. | Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you | r other scl | hedules. |
| | ■ Yes What kind of debt do you have? | | |

- household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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| Debtor 1 | Everett Levi Purvis | Boodmone rago 10 or 11 | |
|----------|----------------------|------------------------|--|
| Debtor 2 | Christina Mae Purvis | Case number (if known) | |

8. **From the** *Statement of Your Current Monthly Income*: Copy your total current monthly income from Official Form 122A-1 Line 11; **OR**, Form 122B Line 11; **OR**, Form 122C-1 Line 14.

1,942.44

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

| | Tota | l claim |
|--|------|-----------|
| From Part 4 on Schedule E/F, copy the following: | | |
| 9a. Domestic support obligations (Copy line 6a.) | \$_ | 0.00 |
| 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) | \$_ | 0.00 |
| 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) | \$_ | 0.00 |
| 9d. Student loans. (Copy line 6f.) | \$_ | 17,199.00 |
| 9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.) | \$_ | 0.00 |
| 9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.) | +\$_ | 0.00 |
| 9g. Total. Add lines 9a through 9f. | \$ | 17,199.00 |

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| | Jase 10-0. | 1001-0 | aiii Doc 1 | | cument Pa | age 17 of 71 | .7710 03. | 33. 4 3 i | Jesc | iviaiii |
|--|---|------------|----------------------------|------------|--|--|--|----------------------|---------------------|---|
| Fill in this | s information t | o identify | your case and t | | | | | | | |
| Debtor 1 | Fve | rett Levi | Purvis | | | | | | | |
| | First N | | | le Name | Las | st Name | | | | |
| Debtor 2 | | istina Ma | | | | | | | | |
| Spouse, if fili | ing) First N | Name | Middl | le Name | Las | st Name | | | | |
| United Sta | ates Bankruptcy | Court for | the: WESTERN | N DISTR | ICT OF MISSOUR | RI | | | | |
| Case num | nber | | | | | | | | _ | neck if this is an |
| Schen each cate hink it fits Information | best. Be as con | B: Pr | operty escribe items. List | le. If two | married people are | sset fits in more than one filing together, both are o of any additional pages | equally resp | onsible for su | pplying | correct |
| □ No. G | own or have any to to Part 2. Where is the prop | | uitable interest in a | any resid | lence, building, land | d, or similar property? | | | | |
| 1.1 | | | | What | t is the property? Ch | neck all that apply | | | | |
| | 2nd Avenue address, if available | | cription | . . | Single-family home Duplex or multi-uni Condominium or co | it building | the amount | of any secured | d claims | kemptions. Put on Schedule D: ed by Property. |
| | Dodge | IA | 50501-0000 ZIP Code | | Land | | Current va | | | nt value of the n you own? \$145,000.00 |
| City | | State | ZIP Code | | Timeshare Other | | Describe the contract of the c | ne nature of your | | ership interest |
| \A/a-b | ostor | | | | Debtor 1 only | he property? Check one | Fee sim | e), if known. ole | | |
| - | oster | | | . 📙 | | | | | | |
| County | у | | | | Debtor 1 and Debt | • | | if this is com | munity _l | property |
| | | | | Other. | | debtors and another | , | tructions) | | |
| | | | | | r information you w erty identification n | rish to add about this ite umber: | m, such as lo | uai | | |

| | or 2 Chri | stina Mae Purv | /IS | | Cas | e number (if known) | |
|------|--|--|--|---|--|--|--|
| | lf you own | or have more | than one, list | | | | |
| 1.2 | 4000 0 41 | 4404 5 | | What | t is the property? Check all that apply | | |
| _ | | n 149th Road | aviation | _ | Single-family home | | claims or exemptions. Put |
| | Street address, if | available, or other desc | cription | | Duplex or multi-unit building | , | red claims on Schedule D: aims Secured by Property. |
| | | | | | Condominium or cooperative | | |
| | | | | | Manufactured or mobile home | | |
| | Bolivar | МО | 65613-0000 | П | | Current value of the entire property? | Current value of the portion you own? |
| - | City | State | ZIP Code | _ | Investment property | \$215,000.00 | \$215,000.00 |
| | Oily | Olalo | 211 0000 | ä | | | |
| | | | | | | | your ownership interest nancy by the entireties, or |
| | | | | Who | has an interest in the property? Check one | a life estate), if known. | |
| | | | | | Debtor 1 only | | |
| _ | Polk | | | _ □ | Debtor 2 only | | |
| | County | | | | Debtor 1 and Debtor 2 only | — Check if this is co | mmunity property |
| | | | | | At least one of the debtors and another | (see instructions) | minumity property |
| | | | | | r information you wish to add about this ite erty identification number: | em, such as local | |
| some | | | or equitable int | erest in a | ny vehicles, whether they are register | red or not? Include any | vehicles you own that |
| | i rs, vans, tru No | | vehicle, also rep | oort it on S | ny vehicles, whether they are register Schedule G: Executory Contracts and Un orcycles | | vehicles you own that |
| | ırs, vans, tru | es. If you lease a | vehicle, also rep | oort it on S | Schedule G: Executory Contracts and Un | | vehicles you own that |
| | nrs, vans, tru No Yes | es. If you lease a | vehicle, also re | oort it on S | Schedule G: Executory Contracts and Un | nexpired Leases. | vehicles you own that |
| _ | nrs, vans, tru No Yes Make: <u>C</u> | es. If you lease a cks, tractors, sp | vehicle, also re | oort it on S les, moto | Schedule G: Executory Contracts and Unorcycles In interest in the property? Check one | Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on <i>Schedule D:</i> |
| | No Yes Make: C | es. If you lease a cks, tractors, sp Chevrolet mpala | vehicle, also re | who has a | Schedule G: Executory Contracts and Unorcycles In interest in the property? Check one 1 only | Do not deduct secured the amount of any secu | claims or exemptions. Put |
| | No Yes Make: C Model: Ir Year: 2 | cks, tractors, sp cks, tractors sp chevrolet mpala 017 | vehicle, also re | Who has a | Schedule G: Executory Contracts and Unorcycles In interest in the property? Check one 1 only 2 only | Do not deduct secured the amount of any secu Creditors Who Have Ck | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the |
| | Make: C Model: Ir Year: 2 | cks, tractors, sp Chevrolet mpala 017 mileage: | vehicle, also re | Who has a Debtor: Debtor: Debtor: | Schedule G: Executory Contracts and Unorcycles In interest in the property? Check one 1 only 2 only 1 and Debtor 2 only | Do not deduct secured the amount of any secu Creditors Who Have Cl. | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. |
| | Make: C Model: Ir Year: 2 Approximate Other inform | cks, tractors, sp Chevrolet mpala 017 mileage: ation: | vehicle, also report utility vehicles | Who has a Debtor: Debtor: Debtor: | Schedule G: Executory Contracts and Unorcycles In interest in the property? Check one 1 only 2 only | Do not deduct secured the amount of any secu Creditors Who Have Ck | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the |
| | Make: C Model: Ir Year: 2 Approximate Other inform | cks, tractors, sp Chevrolet mpala 017 mileage: | vehicle, also report utility vehicles | Who has a Debtor Debtor At least | Schedule G: Executory Contracts and Unorcycles In interest in the property? Check one 1 only 2 only 1 and Debtor 2 only | Do not deduct secured the amount of any secu Creditors Who Have Ck | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the |
| 3.1 | Make: Company Ma | cks, tractors, sp chevrolet mpala 017 mileage: ation: | vehicle, also report utility vehicles also report utility also report utility vehicles also report utility also report utility vehicles also report utility also repor | Who has a Debtor Debtor At least Check is (see inst | Schedule G: Executory Contracts and Universely Check one In interest in the property? Check one I only 2 only I and Debtor 2 only I one of the debtors and another If this is community property Irructions) | Do not deduct secured the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$20,575.00 | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$20,575.00 |
| | Make: Vin #2G1 | cks, tractors, sp chevrolet mpala 017 mileage: ation: 1Z5SA8H9172 | vehicle, also report utility vehicles also report utility also report utility vehicles also report utility also report | Who has a Debtor Debtor At least (see inst | Schedule G: Executory Contracts and Universely Check one In interest in the property? Check one I only 2 only I and Debtor 2 only I one of the debtors and another If this is community property Irructions) In interest in the property? Check one | Do not deduct secured the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$20,575.00 Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$20,575.00 claims or exemptions. Put red claims on Schedule D: |
| 3.1 | Make: Other inform VIN #2G1 Make: V Model: U Model: V Model: V Model: J | cks, tractors, sp Chevrolet mpala 017 mileage: ation: 1Z5SA8H9172 | vehicle, also report utility vehicles also report utility also report utility vehicles also report utility also report utility vehicles also report utility also repor | Who has a Debtor Debtor At least (see inst | Schedule G: Executory Contracts and Universely in interest in the property? Check one 1 only 2 only 1 and Debtor 2 only one of the debtors and another if this is community property tructions) in interest in the property? Check one 1 only | Do not deduct secured the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$20,575.00 Do not deduct secured the amount of any secu | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$20,575.00 |
| 3.1 | Make: Other inform Make: Vin #2G1 Make: Vin #2G1 | cks, tractors, sp chevrolet mpala 017 mileage: ation: 1Z5SA8H91726 folkswagen etta 016 | vehicle, also report utility vehicles also report utility also report utility also report utility also report utility vehicles also report utility also report utili | Who has a Debtor Debtor At least (see inst Who has a | In interest in the property? Check one 1 only 2 only 1 and Debtor 2 only one of the debtors and another if this is community property tructions) In interest in the property? Check one 1 only 2 only | Do not deduct secured the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$20,575.00 Do not deduct secured the amount of any secu Creditors Who Have Cl. Current value of the | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$20,575.00 claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the |
| 3.1 | Make: Other inform Make: Vin #2G1 | cks, tractors, sp Chevrolet mpala 017 mileage: ation: 1Z5SA8H91726 /olkswagen etta 016 mileage: | vehicle, also report utility vehicles also report utility also report utility vehicles also report utility also report utility vehicles also report utility also repor | Who has a Debtor At least (see inst Who has a Debtor Debtor Debtor Debtor | Schedule G: Executory Contracts and Universely in interest in the property? Check one 1 only 2 only 1 and Debtor 2 only one of the debtors and another if this is community property tructions) in interest in the property? Check one 1 only 2 only 1 and Debtor 2 only | Do not deduct secured the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$20,575.00 Do not deduct secured the amount of any secu Creditors Who Have Cl. | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$20,575.00 claims or exemptions. Put red claims on Schedule D: aims Secured by Property. |
| 3.1 | Make: Other inform Make: Vin #2G1 | cks, tractors, sp Chevrolet mpala 017 mileage: ation: 1Z5SA8H91726 /olkswagen etta 016 mileage: | 35000 803 | Who has a Debtor At least (see inst Who has a Debtor Debtor Debtor Debtor | In interest in the property? Check one 1 only 2 only 1 and Debtor 2 only one of the debtors and another if this is community property tructions) In interest in the property? Check one 1 only 2 only | Do not deduct secured the amount of any secu Creditors Who Have Cl. Current value of the entire property? \$20,575.00 Do not deduct secured the amount of any secu Creditors Who Have Cl. Current value of the | claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the portion you own? \$20,575.00 claims or exemptions. Put red claims on Schedule D: aims Secured by Property. Current value of the |

Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Page 19 of 71 Document **Everett Levi Purvis** Debtor 1 Debtor 2 **Christina Mae Purvis** Case number (if known) Do not deduct secured claims or exemptions. Put Mazda 3.3 Make: Who has an interest in the property? Check one the amount of any secured claims on Schedule D: Mazda3 Model: Debtor 1 only Creditors Who Have Claims Secured by Property. 2017 Year: Debtor 2 only Current value of the Current value of the 35000 Approximate mileage: ■ Debtor 1 and Debtor 2 only entire property? portion you own? Other information: At least one of the debtors and another VIN #3MZBN1V77HM128831 \$13,925.00 \$13,925.00 ☐ Check if this is community property (see instructions) 4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories ■ No ☐ Yes 5 Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for \$50.775.00 .pages you have attached for Part 2. Write that number here.....=> Part 3: Describe Your Personal and Household Items Do you own or have any legal or equitable interest in any of the following items? Current value of the portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware □ No ■ Yes. Describe..... Freezer, bedding, couch, chairs, beds, refrigerator, washer, dryer, tables, desk, dishwasher, stove, dressers, night stands, love seat, \$1,500.00 dishes, pots, pans, silverware, etc. 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games □ No Yes. Describe..... Projector TV, cell phones \$750.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No ☐ Yes. Describe..... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No

Official Form 106A/B Schedule A/B: Property page 3

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

☐ Yes. Describe.....

Yes. Describe.....

10. Firearms

□ No

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| Debtor 1 Debtor 2 | Everett Lev Christina M | | n) |
|----------------------|--|---|---|
| | | 12 gauge shotgun | \$150.00 |
| | | Muzzle loader | \$200.00 |
| | | .380 pistol | \$200.00 |
| | | .22 rifle | \$120.00 |
| □ No | | lothes, furs, leather coats, designer wear, shoes, accessories | |
| | | Basic men's clothing | \$250.00 |
| | | Basic women's clothing | \$500.00 |
| 13. Non- | farm animals | Costume jewelry | \$500.00 |
| <i>Exai</i> ■ No | nples: Dogs, cats, | birds, horses | |
| | s. Describe | | |
| ■ No | other personal and a second and | nd household items you did not already list, including any health aids you did not list formation | |
| | | of all of your entries from Part 3, including any entries for pages you have attached number here | \$4,170.00 |
| | escribe Your Final | | |
| Do you | own or have any | legal or equitable interest in any of the following? | Current value of the portion you own? Do not deduct secured claims or exemptions. |
| ■ No | mples: Money you | have in your wallet, in your home, in a safe deposit box, and on hand when you file your pe | tition |
| | | savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerag If you have multiple accounts with the same institution, list each. | e houses, and other similar |
| ■ Ye | . | Institution name: | |

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| | ebtor 1 ebtor 2 | Everett Levi Purv Christina Mae Pu | | Case number (if known) | |
|------|--------------------|---|--|---|--|
| | | 17 | .1. Checking | BluCurrent Credit Union #10100009238404 | \$60.00 |
| | | 17 | .2. Savings | BluCurrent Credit Union #923840 | \$5.00 |
| 18. | Examp | , mutual funds, or pul bles: Bond funds, inves | | okerage firms, money market accounts | |
| | ■ No □ Yes | | Institution or issuer | name: | |
| 19. | | ublicly traded stock a renture | nd interests in incorpo | orated and unincorporated businesses, including an interest | in an LLC, partnership, an |
| | ■ No | enture | | | |
| | | Give specific informat | ion about them | | |
| | □ 165. | | Name of entity: | % of ownership: | |
| 20. | Negoti | <i>iable instrument</i> s includ | de personal checks, cas | otiable and non-negotiable instruments shiers' checks, promissory notes, and money orders. ansfer to someone by signing or delivering them. | |
| | ■ No | | | | |
| | ☐ Yes. | Give specific information | on about them Issuer name: | | |
| 21. | | ment or pension acco ples: Interests in IRA, E | | 103(b), thrift savings accounts, or other pension or profit-sharing p | lans |
| | ■ No | | | | |
| | ☐ Yes. | List each account sepa Ty | arately. pe of account: | Institution name: | |
| 22. | Your s | | osits you have made so | that you may continue service or use from a company public utilities (electric, gas, water), telecommunications companion | es, or others |
| | ■ No | | | Institution name or individual: | |
| 00 | | | | | |
| 23. | . Annuiti ■ No | ies (A contract for a pe | eriodic payment of mone | ey to you, either for life or for a number of years) | |
| | ☐ Yes | lssuer r | name and description. | | |
| 24. | | ts in an education IRA C. §§ 530(b)(1), 529A(| | ualified ABLE program, or under a qualified state tuition prog | ıram. |
| | Yes | Institutio | on name and description | n. Separately file the records of any interests.11 U.S.C. § 521(c): | |
| 25. | Trusts, | , equitable or future i | nterests in property (o | ther than anything listed in line 1), and rights or powers exer | cisable for your benefit |
| | ■ No □ Yes. | Give specific informat | ion about them | | |
| 26. | Examp | | | nd other intellectual property dds from royalties and licensing agreements | |
| | ■ No □ Yes. | Give specific informat | ion about them | | |
| 27. | Examp | | ther general intangible exclusive licenses, coop | es perative association holdings, liquor licenses, professional license | s |
| | ■ No □ Yes. | Give specific informat | ion about them | | |
| B. # | | | | | Company control of the |
| IVI | oney or | property owed to you | l f | | Current value of the portion you own? Do not deduct secured |

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| | tor 1 tor 2 | Everett Levi Purvis Christina Mae Purvis | Document | Case number (if known) | |
|-------|-----------------|---|-----------------------------------|--|----------------------------|
| | | | | | claims or exemptions. |
| _ | Tax ref ■ No | funds owed to you | | | |
| |] Yes. | Give specific information about the | m, including whether you alrea | ady filed the returns and the tax years | |
| | | r support oles: Past due or lump sum alimony | v, spousal support, child suppo | ort, maintenance, divorce settlement, property | settlement |
| | | Give specific information | | | |
| _ | | amounts someone owes you oles: Unpaid wages, disability insur benefits; unpaid loans you ma | | efits, sick pay, vacation pay, workers' comper | nsation, Social Security |
| | ☐ Yes. | Give specific information | | | |
| _ | | sts in insurance policies bles: Health, disability, or life insura | nce; health savings account (h | HSA); credit, homeowner's, or renter's insurar | nce |
| |] Yes. | Name the insurance company of e Company na | | Beneficiary: | Surrender or refund value: |
| | If you a | terest in property that is due you are the beneficiary of a living trust, one has died. | | d surance policy, or are currently entitled to rece | eive property because |
| _ | ■ No □ Yes. | Give specific information | | | |
| 33. (| | s against third parties, whether o ples: Accidents, employment disput | | t or made a demand for payment to sue | |
| _ | ■ No □ Yes. | Describe each claim | | | |
| | Other o | contingent and unliquidated clai | ms of every nature, includinຸ | g counterclaims of the debtor and rights to | set off claims |
| | Yes. | Describe each claim | | | |
| _ | Any fin ■ No | nancial assets you did not alread | y list | | |
| | Yes. | Give specific information | | | |
| 36. | | - | , | ny entries for pages you have attached | \$65.00 |
| Part | 5: De | scribe Any Business-Related Propert | y You Own or Have an Interest I | n. List any real estate in Part 1. | |
| _ | | own or have any legal or equitable in | terest in any business-related pr | operty? | |
| _ | | Go to line 38. | | | |
| Part | | scribe Any Farm- and Commercial Fi ou own or have an interest in farmland, | | n or Have an Interest In. | |
| 46. I | _ ` | u own or have any legal or equita Go to Part 7. | ble interest in any farm- or c | ommercial fishing-related property? | |
| | ☐ Yes | s. Go to line 47. | | | |

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| Deb | tor 1 | Everett Levi Purvis | Page 23 01 | 71 | |
|------|--------------|---|--------------------|------------------------------|--------------|
| Deb | tor 2 | Christina Mae Purvis | | Case number (if known) | |
| Part | 7: | Describe All Property You Own or Have an Interest in That You I | Did Not List Above | | |
| _ | Examp | have other property of any kind you did not already list? les: Season tickets, country club membership | | | |
| _ | No Yes. 0 | Give specific information | | | |
| 54. | Add th | he dollar value of all of your entries from Part 7. Write that | number here | | \$0.00 |
| Part | 8: | List the Totals of Each Part of this Form | | | |
| 55. | Part 1 | : Total real estate, line 2 | | | \$360,000.00 |
| 56. | Part 2 | : Total vehicles, line 5 | \$50,775.00 | _ | · |
| 57. | Part 3 | : Total personal and household items, line 15 | \$4,170.00 | | |
| 58. | Part 4 | : Total financial assets, line 36 | \$65.00 | | |
| 59. | Part 5 | : Total business-related property, line 45 | \$0.00 | | |
| 60. | Part 6 | : Total farm- and fishing-related property, line 52 | \$0.00 | | |
| 61. | Part 7 | : Total other property not listed, line 54 + | \$0.00 | | |
| 62. | Total | personal property. Add lines 56 through 61 | \$55,010.00 | Copy personal property total | \$55,010.00 |
| 63. | Total | of all property on Schedule A/B. Add line 55 + line 62 | | | \$415,010.00 |

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| | | DOM: | <u> </u> | |
|---------------------|--------------------------|--------------------|-------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Everett Levi Purv | is | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Christina Mae Pu | rvis | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT (| OF MISSOURI | |
| Case number | | | | |
| (if known) | | | | |
| | | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B*: *Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2*: *Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| Part 1: | Identify the Property You Claim as Exempt |
|---------|---|
| | |

| 1. | Which set of exem | ptions are v | ou claiming? | Check one only | , even if yc | our spouse is filind | with you |
|----|-------------------|--------------|--------------|----------------|----------------|----------------------|----------|
|----|-------------------|--------------|--------------|----------------|----------------|----------------------|----------|

- You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
- ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

| To any property you list on ocheane A/B | that you olami ao oxo | р.ч, | | |
|--|--------------------------------------|------|---|---------------------|
| Brief description of the property and line on Schedule A/B that lists this property | Current value of the portion you own | Amo | Specific laws that allow exemptio | |
| | Copy the value from Schedule A/B | Che | eck only one box for each exemption. | |
| 4623 South 149th Road Bolivar, MO 65613 Polk County | \$215,000.00 | | \$15,000.00 | RSMo § 513.475 |
| Line from Schedule A/B: 1.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2016 Volkswagen Jetta 14000 miles VIN #3VW637AJ8GM398192 | \$16,275.00 | | \$3,000.00 | RSMo § 513.430.1(5) |
| Line from Schedule A/B: 3.2 | | | 100% of fair market value, up to any applicable statutory limit | |
| 2017 Mazda Mazda3 35000 miles VIN #3MZBN1V77HM128831 | \$13,925.00 | | \$3,000.00 | RSMo § 513.430.1(5) |
| Line from Schedule A/B: 3.3 | | | 100% of fair market value, up to any applicable statutory limit | |
| Freezer, bedding, couch, chairs, beds, refrigerator, washer, dryer, | \$1,500.00 | | \$1,500.00 | RSMo § 513.430.1(1) |
| dishes, pots, pots, silverware, etc. Line from Schedule A/B: 6.1 | | | 100% of fair market value, up to any applicable statutory limit | |
| Projector TV, cell phones Line from Schedule A/B: 7.1 | \$750.00 | | \$750.00 | RSMo § 513.430.1(1) |
| Ellic Holli Golledale AVD. 111 | | | 100% of fair market value, up to any applicable statutory limit | |

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Debtor 2 Christina Mae Purvis Case number (if known) Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B 12 gauge shotgun RSMo § 513.430.1(12) \$150.00 \$150.00 Line from Schedule A/B: 10.1 100% of fair market value, up to any applicable statutory limit Muzzle loader RSMo § 513.430.1(12) \$200.00 \$200.00 Line from Schedule A/B: 10.2 100% of fair market value, up to any applicable statutory limit .380 pistol RSMo § 513.430.1(12) \$200.00 \$200.00 Line from Schedule A/B: 10.3 100% of fair market value, up to any applicable statutory limit 22 rifle RSMo § 513.430.1(12) \$120.00 \$120.00 Line from Schedule A/B: 10.4 100% of fair market value, up to any applicable statutory limit Basic men's clothing RSMo § 513.430.1(1) \$250.00 \$250.00 Line from Schedule A/B: 11.1 100% of fair market value, up to any applicable statutory limit Basic women's clothing RSMo § 513.430.1(1) \$500.00 \$500.00 Line from Schedule A/B: 11.2 100% of fair market value, up to any applicable statutory limit Costume jewelry RSMo § 513.430.1(2) \$500.00 \$500.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Checking: BluCurrent Credit Union** RSMo § 513.430.1(3) \$60.00 \$60.00 #10100009238404 100% of fair market value, up to Line from Schedule A/B: 17.1 any applicable statutory limit Savings: BluCurrent Credit Union RSMo § 513.430.1(3) \$5.00 \$5.00 #923840 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$160,375? (Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? No Yes

Everett Levi Purvis

Debtor 1

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| | | Document Page | 26 OT 71 | | |
|---|-----------------------|--|--|--------------------------|-------------------|
| Fill in this informat | ion to identify you | ur case: | | | |
| Debtor 1 | Everett Levi Pu | rvis | | | |
| - | First Name | Middle Name Last Nam | е | - | |
| _ | Christina Mae F | | | _ | |
| (Spouse if, filing) | First Name | Middle Name Last Nam | e | | |
| United States Bankro | uptcy Court for the | : WESTERN DISTRICT OF MISSOURI | | | |
| Coco number | | | | | |
| Case number (if known) | | | | ☐ Check | if this is an |
| | | | | _ | led filing |
| 000 1 1 5 | | | | | |
| Official Form 1 | | | | | |
| Schedule D | : Creditors | s Who Have Claims Secu | red by Propert | У | 12/15 |
| | | If two married people are filing together, both a out, number the entries, and attach it to this for | | | |
| 1. Do any creditors have | ve claims secured b | y your property? | | | |
| ☐ No. Check thi | s box and submit t | this form to the court with your other schedule | es. You have nothing else t | to report on this form. | |
| _ | of the information | • | J | | |
| | ecured Claims | bolow. | | | |
| | | and the second s | Column A | Column B | Column C |
| for each claim. If more | than one creditor has | more than one secured claim, list the creditor sepa s a particular claim, list the other creditors in Part 2. | | Value of collateral | Unsecured |
| much as possible, list the | ne claims in alphabet | ical order according to the creditor's name. | Do not deduct the value of collateral. | that supports this claim | portion If any |
| 2.1 Credit Acceptance | | Describe the property that secures the claim: | \$20,527.00 | \$13,925.00 | \$6,602.00 |
| Creditor's Name | | 2017 Mazda Mazda3 35000 miles | | | |
| 25505 Wood | 12 Mile Road | VIN #3MZBN1V77HM128831 | | | |
| Suite 3000 | 12 Wille Road | As of the date you file, the claim is: Check all th | at | | |
| Southfield, N | /II 48034 | apply. Contingent | | | |
| Number, Street, City | y, State & Zip Code | ☐ Unliquidated | | | |
| | | ☐ Disputed | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | | An agreement you made (such as mortgage of car loan) | or secured | | |
| ■ Debtor 1 and Debto | r 2 only | \square Statutory lien (such as tax lien, mechanic's lie | en) | | |
| ☐ At least one of the o | lebtors and another | ☐ Judgment lien from a lawsuit | | | |
| ☐ Check if this claim community debt | relates to a | Other (including a right to offset) | | | |
| | Opened 07/18 Last | | | | |
| Date debt was incurre | Active d 9/14/18 | Last 4 digits of account number 40 | 22 | | |
| | <u> </u> | | | | |
| 2.2 Flagstar Ban | nk | Describe the property that secures the claim: | \$175,191.00 | \$145,000.00 | \$30,191.00 |
| Creditor's Name | | 916 2nd Avenue North Fort Dodge, IA 50501 Webster County | | · | |
| Attn: Bankru 5151 Corpor Troy, MI 480 | ate Drive | As of the date you file, the claim is: Check all th apply. | at | | |
| Number, Street, City | | ☐ Contingent☐ Unliquidated | | | |
| Hamber, Sueet, Oil) | ,, Sialo & Zip Ouc | ☐ Unilquidated ☐ Disputed | | | |
| Who owes the debt? | Check one. | Nature of lien. Check all that apply. | | | |
| Debtor 1 only | | ■ An agreement you made (such as mortgage of | or secured | | |
| Debtor 2 only | | car loan) | | | |
| Debtor 1 and Debto | r 2 only | ☐ Statutory lien (such as tax lien, mechanic's lie | n) | | |

☐ Judgment lien from a lawsuit

 $\hfill \square$ At least one of the debtors and another

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| Debtor 1 Everett Levi Pur | rvis | Case number (if know | v) |
|---|---|-------------------------|------------------------|
| First Name | Middle Name Last Name | _ | |
| Debtor 2 Christina Mae P | YURVIS Middle Name Last Name | _ | |
| i iist ivaine | Middle Name | | |
| ☐ Check if this claim relates to | Other (including a right to offset) | | |
| community debt | | | |
| Ope | ned | | |
| 05/1 | 5 Last | | |
| Activ | | _{her} 2188 | |
| Date debt was incurred 7/05/ | /18 Last 4 digits of account numb | oer 2100 | |
| LISAA Fodoral Savin | age. | | |
| 2.3 USAA Federal Savin | Describe the property that secures t | the claim: \$30,421.00 | \$20,575.00 \$9,846.00 |
| Creditor's Name | 2017 Chevrolet Impala 3500 | | |
| Attn: Bankruptcy | VIN #2G11Z5SA8H9172803 | | |
| 10750 Mcdermott | As of the date you file, the claim is: | Chack all that | |
| Freeway | apply. | Oneok all that | |
| San Antonio, TX 782 | | | |
| Number, Street, City, State & Zij | | | |
| Who owes the debt? Check on | Disputed ne. Nature of lien. Check all that apply. | | |
| Debtor 1 only | ■ An agreement you made (such as | mortagae or secured | |
| Debtor 2 only | car loan) | Horigage of Secured | |
| ■ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, med | chanic's lien) | |
| ☐ At least one of the debtors and | d another | | |
| ☐ Check if this claim relates to | Other (including a right to offset) | | |
| community debt | | | |
| Ope | ned | | |
| | 7 Last | | |
| Activ Date debt was incurred 6/07/ | | _{per} 1704 | |
| | Lust 4 digits of doodant number | | |
| USAA Federal Savin | nas | | |
| Bank | Describe the property that secures to | the claim: \$21,064.00 | \$16,275.00 \$4,789.00 |
| Creditor's Name | 2016 Volkswagen Jetta 1400 | | |
| Attn: Bankruptcy | VIN #3VW637AJ8GM398192 | 2 | |
| 10750 McDermott | As of the date you file, the claim is: | Check all that | |
| Freeway San Antonio, TX 782 | apply. | | |
| Number, Street, City, State & Zip | | | |
| riambor, outdoor, only, orace a 24 | Disputed | | |
| Who owes the debt? Check on | • | | |
| Debtor 1 only | An agreement you made (such as | mortgage or secured | |
| Debtor 2 only | car loan) | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Statutory lien (such as tax lien, med | chanic's lien) | |
| At least one of the debtors and | | | |
| ☐ Check if this claim relates to community debt | Other (including a right to offset) | | |
| community dest | | | |
| Oper | | | |
| 01/18 Activ | 8 Last | | |
| Date debt was incurred 8/27/ | | _{ber} 0508 | |
| <u> </u> | | | |
| USSA Federal Savin | ng | | |
| 2.5 Bank/Nationstar | Describe the property that secures t | the claim: \$190,679.00 | \$215.000.00 \$0.00 |

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| Debtor 1 | Everett Le | vi Purvis | | | | Case number (if know) | |
|---|--------------------------------|--|--|----------------------------|------------|-----------------------|---|
| | First Name | Middle N | ame | Last Name | | · | _ |
| Debtor 2 | Christina | Mae Purvis | | | | | |
| | First Name | Middle N | ame | Last Name | | | |
| Creditor's Name Attn: Bankruptcy 8950 Cypress Waters Blvd, Ste B Coppell, TX 75019 | | 4623 South 65613 Polk | 149th Road Bolivar County | , MO | | | |
| | | As of the date you file, the claim is: Check all that apply. | | ck all that | | | |
| Numb | ber, Street, City, S | State & Zip Code | Unliquidated | i | | | |
| Who owe | Who owes the debt? Check one. | | ☐ Disputed Nature of lien. Check all that apply. | | | | |
| ☐ Debtor ☐ Debtor | • | | An agreeme car loan) | ent you made (such as mort | gage or se | ecured | |
| ■ Debtor | 1 and Debtor 2 | ? only | Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit | | | | |
| ☐ At least | t one of the deb | otors and another | | | | | |
| | if this claim re unity debt | elates to a | Other (inclu | ding a right to offset) | | | |
| Date debt | was incurred | Opened 06/17 Last Active 6/01/18 | Last 4 d | ligits of account number | 9384 | | |
| Add the | dollar value o | f your entries in C | Column A on this | page. Write that number | here: | \$437,882.00 | |
| If this is | | of your form, add | | totals from all pages. | | \$437,882.00 | |

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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|--------------------------|--|--|--|--|--|
| Filli | n this informa | ation to identify your case: | | | |
| Debt | or 1 | Everett Levi Purvis | | | |
| | | First Name | Middle Name Last Name | _ | |
| Debt | | Christina Mae Purvis | | | |
| (Spou | se if, filing) | First Name | Middle Name Last Name | | |
| Unite | ed States Banl | kruptcy Court for the: WE | STERN DISTRICT OF MISSOURI | | |
| Case | number | | | | |
| (if kno | | | |] | ☐ Check if this is an |
| | | | | | amended filing |
| | cial Form | | Have Unsecured Claims | | 12/15 |
| | | | t 1 for creditors with PRIORITY claims and | D. 4.0.6 | |
| iched iched eft. A | lule G: Executor lule D: Creditor ttach the Conti and case numl | ory Contracts and Unexpired L rs Who Have Claims Secured I inuation Page to this page. If y ber (if known). | could result in a claim. Also list executory of eases (Official Form 106G). Do not include by Property. If more space is needed, copy ou have no information to report in a Part, | any creditors with partially secured cl the Part you need, fill it out, number th | aims that are listed in ne entries in the boxes on the |
| Part | | of Your PRIORITY Unsecu | | | |
| _ | | s have priority unsecured clai | ms against you? | | |
| _ | No. Go to Pa | rt 2. | | | |
| | Yes. | of Vous NONDDIODITY Us | assumed Claims | | |
| Part | | of Your NONPRIORITY Un | | | |
| _ | _ | s have nonpriority unsecured | - | | |
| L | → No. You have | e nothing to report in this part. So | ubmit this form to the court with your other school | edules. | |
| I | Yes. | | | | |
| u tl | nsecured claim | , list the creditor separately for e | in the alphabetical order of the creditor who ach claim. For each claim listed, identify what to other creditors in Part 3.lf you have more than | type of claim it is. Do not list claims alread | dy included in Part 1. If more |
| | | | | | Total claim |
| 4.1 | AAFES | | Last 4 digits of account number | 4124 | \$6,760.00 |
| ' | | Creditor's Name | | One and 00/44 Leat Active | |
| | PO Box (| n: Bankruptcy 650060 | When was the debt incurred? | Opened 09/11 Last Active 6/21/18 | |
| | Dallas, T | X 75265 | | <u> </u> | |
| | | eet City State Zlp Code | As of the date you file, the claim | is: Check all that apply | |
| | _ | red the debt? Check one. | _ | | |
| | Debtor 1 | • | Contingent | | |
| | Debtor 2 | - | Unliquidated | | |
| | | and Debtor 2 only | Disputed | d alaim. | |
| | | one of the debtors and another | Type of NONPRIORITY unsecured . □ Student loans | u Giaini: | |
| | debt | f this claim is for a community | Obligations arising out of a sepa | ration agreement or divorce that you did | not |
| | ■ No | i audjeut tu unaet? | report as priority claims Debts to pension or profit-sharir | or plans, and other similar debts | |
| | | | | = : | |
| | ☐ Yes | | ■ Other. Specify Charge Acc | Jount | |

| Debtor 2 Christina Mae Purvis | | Case number (if know) | | |
|-------------------------------|--|---|------------|--|
| 4.2 | Advance Financial 24/7 | Last 4 digits of account number 8206 | \$307.79 | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept. 100 Oceanside Drive Nashville, TN 37204 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Type of NONPRIORITY unsecured claim: ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | Other. Specify Unsecured Debt | | |
| 4.3 | Advance Financial 24/7 | Last 4 digits of account number 2164 | \$2,011.00 | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept. 100 Oceanside Drive Nashville, TN 37204 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: ☐ Student loans | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | No | Debts to pension or profit-sharing plans, and other similar debts | | |
| | ☐ Yes | ■ Other Specify Unsecured Debt | | |
| 4.4 | Always Travel With Us | Last 4 digits of account number 0270 | \$170.70 | |
| | Nonpriority Creditor's Name 2626 E. Oakland Park Blvd. | When was the debt incurred? | | |
| | Fort Lauderdale, FL 33306 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | |
| | ☐ Check if this claim is for a community debt | Student loans | | |
| | ls the claim subject to offset? | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | |
| | Yes | ■ Other. Specify Unsecured Debt | | |
| | | | | |

| Debtor | 2 Christina Mae Purvis | Case number (if know) | | | |
|--------|---|---|--|----------|--|
| 4.5 | Arquitt Pediatric Dentistry Nonpriority Creditor's Name | Last 4 digits of account number | | \$180.00 | |
| | 3045 S. Delaware Ave. #B Springfield, MO 65804 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | |
| | ■ No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Medical De | bt | | |
| 4.6 | AT&T | Last 4 digits of account number | 8620 | \$583.25 | |
| | Nonpriority Creditor's Name ATTN: Bankruptcy Dept. 4331 Communications Drive Floor 4W | When was the debt incurred? | | | |
| | Dallas, TX 75211 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | | | |
| | Debtor 1 only | П | | | |
| | Debtor 2 only | ☐ Contingent | | | |
| | | ☐ Unliquidated ☐ Disputed Type of NONPRIORITY unsecured claim: | | | |
| | Debtor 1 and Debtor 2 only | | | | |
| | At least one of the debtors and another | Student loans | | | |
| | ☐ Check if this claim is for a community debt | <u></u> | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharing | | | |
| | Yes | ■ Other. SpecifyUnsecured Debt | | | |
| 4.7 | BluCurrent Credit Union Nonpriority Creditor's Name | Last 4 digits of account number | 0001 | Unknown | |
| | 1770 W. Sunset Street Springfield, MO 65807 | When was the debt incurred? | Opened 11/17 Last Active 3/12/18 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | |
| | Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt | ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | |
| | Is the claim subject to offset? | | | | |
| | No | Debts to pension or profit-sharing | | | |
| | Yes | Other. Specify Automobile | Loan | | |
| | | | | | |

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| 2 Christina Mae Purvis | | Case number (if know) | |
|---|---|--|------------|
| Bolivar Smiles Dentistry | Last 4 digits of account number | 3169 | \$188.00 |
| Nonpriority Creditor's Name 1300 N. Oakland Suite B | When was the debt incurred? | 8/29/2018 | |
| Bolivar, MO 65613 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| □ Yes | ■ Other. Specify Medical De | | |
| Brent E. Cloyd | Last 4 digits of account number | | \$3,000.00 |
| Nonpriority Creditor's Name Penny L. Cloyd 4165 S. 135th Road | When was the debt incurred? | 3/25/2017 | |
| Bolivar, MO 65613 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | , | on one and apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Unsecured | Debt | |
| Cash Central | Last 4 digits of account number | 8086 | \$550.00 |
| Nonpriority Creditor's Name 6785 Bobcat Way Suite 200 | When was the debt incurred? | | |
| Dublin, OH 43016-1443 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | _ | | |
| ☐ Debtor 1 only ☐ Debtor 2 only | Contingent | | |
| _ | ☐ Unliquidated | | |
| Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | |
| ☐ At least one of the debtors and another ☐ Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Unsecured | Debt | |

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| Christina Mae Purvis | | Case number (if know) | |
|--|---|--|----------|
| Check 'N Go | Last 4 digits of account number | 8940 | \$625.0 |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept. 7755 Montgomery Road Suite 400 | When was the debt incurred? | | |
| Cincinnati, OH 45236 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Unsecured | Debt | |
| Citibank/Sears | Last 4 digits of account number | 1873 | \$2,236. |
| Nonpriority Creditor's Name | | | · , |
| Attn: Bankruptcy PO Box 6275 | When was the debt incurred? | Opened 06/17 Last Active 7/20/18 | |
| Sioux Falls, SD 57117 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | , | | |
| ■ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | ount | |
| Citizens Memorial Clinics | Last 4 digits of account number | 7342 | \$102. |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 939 | When was the debt incurred? | | |
| Bolivar, MO 65613-0939 | | | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | | | |
| Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| \square At least one of the debtors and another | Type of NONPRIORITY unsecured | claim: | |
| Check if this claim is for a community | Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | ■ Other. Specify Medical De | | |

| Citizens Memorial Hospital | Last 4 digits of account number | 1212 | \$411.4 |
|--|---|--|---------|
| Nonpriority Creditor's Name 1500 N. Oakland Avenue Bolivar, MO 65613 | When was the debt incurred? | 7/20/2018 - 8/17/2018 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| Yes | Other. Specify Medical De | bt | |
| Citizens Memorial Hospital | Last 4 digits of account number | 7342 | \$42.1 |
| Nonpriority Creditor's Name 1500 N. Oakland Avenue Bolivar, MO 65613 | When was the debt incurred? | 7/26/2018 - 8/17/2018 | |
| Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | • | , | |
| Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | □ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Medical De | bt | |
| Citizens Memorial Hospital | Last 4 digits of account number | 7021 | Unknov |
| Nonpriority Creditor's Name 1500 N. Oakland Avenue | When was the debt incurred? | | |
| Bolivar, MO 65613 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | , | on one and apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | l claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| ☐ Yes | Other. Specify Medical De | ht | |

| Debtor 2 Christina Mae Purvis | | Case number (if know) | | | |
|-------------------------------|--|---|---|------------|--|
| 4.1 | CNU of Missouri LLC | Last 4 digits of account number | 2289 | \$2,600.00 | |
| | Nonpriority Creditor's Name d/b/a CashNetUSA 175 West Jackson Blvd. Suite 1000 Chicago, IL 60604 | When was the debt incurred? | 7/20/2018 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | |
| | Yes | Other. Specify Unsecured | Debt | | |
| 4.1 | Comenity Bank/Younkers | Last 4 digits of account number | 9856 | \$2,598.00 | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 182125 Columbus, OH 43218 | When was the debt incurred? | Opened 02/17 Last Active 6/05/18 | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | |
| | ■ Debtor 1 only | ☐ Contingent | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | |
| | Is the claim subject to offset? | report as priority claims | | | |
| | ■ No | Debts to pension or profit-sharin | | | |
| | Yes | Other. Specify Charge Acc | count | | |
| 4.1 | Compass Health Pharmacy Nonpriority Creditor's Name | Last 4 digits of account number | 1310 | \$58.76 | |
| | PO Box 803919 Kansas City, MO 64180-3919 | When was the debt incurred? | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | is: Check all that apply | | |
| | Who incurred the debt? Check one. | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | |
| | Debtor 2 only | Unliquidated | | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | ☐ Student loans ☐ Obligations arising out of a sepa report as priority claims | aration agreement or divorce that you did not | | |
| | No | Debts to pension or profit-sharin | or plans, and other similar debts | | |
| | _ | | | | |
| | ☐ Yes | Other. Specify Medical De | <u>υι</u> | | |

| | Christina Mae Purvis | | Case number (if know) | |
|-----|---|--|--|------------|
| 4.2 | CoxHealth | Last 4 digits of account number | 7051 | \$425.05 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept. 1423 N. Jefferson Ave. | When was the debt incurred? | 8/2018 | |
| | Springfield, MO 65802 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| | ☐ Yes | Other. Specify Medical De | bt | |
| 4.2 | CoxHealth | Last 4 digits of account number | 0555 | \$4,732.10 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept. 1423 N. Jefferson Ave. | When was the debt incurred? | 8/25/2018 | |
| | Springfield, MO 65802 Number Street City State Zlp Code | As of the date you file, the claim | s: Check all that apply | |
| | Who incurred the debt? Check one. | | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | lacksquare At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Medical De | bt | |
| 4.2 | DIRECTV | | 2240 | University |
| 2 | Nonpriority Creditor's Name | Last 4 digits of account number | <u>2219</u> | Unknown |
| | Attn: Bankruptcy Dept. 4331 Communications Drive Floor 4W | When was the debt incurred? | | |
| | Dallas, TX 75211 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | |
| | Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □ Yes | ■ Other. Specify Unsecured | | |
| | _ 100 | - Other, Specify | • | |

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| Debto | Christina Mae Purvis | | Case number (if know) | | | | |
|-------|--|---|---|-------------|--|--|--|
| 4.2 | FedLoan Servicing | Last 4 digits of account number | 0006 | \$17,199.00 | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy PO Box 69184 Harrisburg, PA 17106 | When was the debt incurred? | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | | |
| | ■ Debtor 1 only | Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ At least one of the debtors and another☐ Check if this claim is for a community | Student loans | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | □ Yes | Other. Specify | | | | | |
| | | Educationa | Il Loan | | | | |
| 4.2 | Fingerhut Nonpriority Creditor's Name | Last 4 digits of account number | 8896 | Unknown | | | |
| | Attn: Bankruptcy PO Box 1250 Saint Cloud, MN 56395 | When was the debt incurred? | Opened 07/18 Last Active 8/22/18 | | | | |
| | Number Street City State ZIp Code Who incurred the debt? Check one. | As of the date you file, the claim i | is: Check all that apply | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | |
| | Debtor 1 and Debtor 2 only | Disputed | | | | | |
| | At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | o ciaim: | | | | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | <u></u> | aration agreement or divorce that you did not | | | | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | |
| 4.2 | Foursight Capital, LLC. Nonpriority Creditor's Name | Last 4 digits of account number | 6768 | Unknown | | | |
| | Attn: Bankruptcy PO Box 45026 Salt Lake City, UT 84145 | When was the debt incurred? | Opened 08/15 Last Active 8/30/17 | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | | | | |
| | Who incurred the debt? Check one. | _ | | | | | |
| | ☐ Debtor 1 only ☐ Debtor 2 only | ☐ Contingent | | | | | |
| | - Chinquidated | | | | | | |
| | ■ Debtor 1 and Debtor 2 only□ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separation agreement or divorce that you did not report as priority claims | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Automobile | | | | | |

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| Debtor 2 Christina Mae Purvis | | Case number (if know) | | | | | | | |
|-------------------------------|--|---|---|---|--|--|--|--|--|
| 4.2 | 0 | | | | | | | | |
| 6 | Garretson Trash Service Nonpriority Creditor's Name | Last 4 digits of account number | | Unknown | | | | | |
| | 1117 South Lillian Bolivar, MO 65613 | When was the debt incurred? | | | | | | | |
| | Number Street City State Zlp Code | | | | | | | | |
| | Who incurred the debt? Check one. | • | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | | | | | | | | |
| | ☐ At least one of the debtors and another | ☐ Disputed Type of NONPRIORITY unsecure | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharir | ng plans, and other similar debts | | | | | | |
| | □ Yes | ■ Other. Specify 4623 South | | | | | | | |
| | Li res | Other. Specify 4023 30411 | 143th Road, Bollvar, Mo | | | | | | |
| 4.2 | John T. Tweedie D.C. | Last 4 digits of account number | 0321 | \$36.00 | | | | | |
| | Nonpriority Creditor's Name | | | • | | | | | |
| | 211 N. Main Avenue | When was the debt incurred? | 9/1/2017 - 3/6/2018 | | | | | | |
| | Bolivar, MO 65613-1519 Number Street City State Zlp Code | As of the date you file, the claim is: Check all that apply | | | | | | | |
| | Who incurred the debt? Check one. | no or the date you me, the claim | or oncor all that apply | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | | | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ At least one of the debtors and another | ' | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | tors and another Type of NONPRIORITY unsecured claim: | | | | | | | |
| | debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | , | | | | | | |
| | ■ No | Debts to pension or profit-sharing | ng plans, and other similar debts | | | | | | |
| | ☐ Yes | Other. Specify Medical De | bt | | | | | | |
| _ | | | | | | | | | |
| 4.2 8 | Kohl's/Capital One | Last 4 digits of account number | 2862 | \$3,204.00 | | | | | |
| | Nonpriority Creditor's Name Kohl's Credit | | Opened 07/15 Last Active | | | | | | |
| | PO Box 3120 | When was the debt incurred? | 6/05/18 | | | | | | |
| | Milwaukee, WI 53201 | | | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | is: Check all that apply | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | <u> </u> | | | | | | | | |
| | Debtor 2 only | | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | · | | | | | | | |
| | At least one of the debtors and another | Student loans | | | | | | | |
| | ☐ Check if this claim is for a community debt | _ | | | | | | | |
| | Is the claim subject to offset? | report as priority claims | aration agreement or divorce that you did not | | | | | | |
| | ■ No | ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | Yes | ■ Other. Specify Charge Ac | count | | | | | | |
| | | _F , | | | | | | | |

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| | 1 Everett Levi Purvis 2 Christina Mae Purvis | | Case number (if know) | | | | |
|-----|--|--|--|------------|--|--|--|
| 4.2 | LendingPoint LLC, | Last 4 digits of account number | 0186 | Unknown | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy 1201 Roberts Blvd, Suite 200 Kennesaw, GA 30144 | When was the debt incurred? | Opened 10/17 Last Active 3/27/18 | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | No | ☐ Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | Yes | Other. Specify Unsecured | | | | | |
| 4.3 | McCarthy, Burgess & Wolff | Last 4 digits of account number | 7917 | \$1,046.00 | | | |
| | Nonpriority Creditor's Name 26000 Cannon Road Cleveland. OH 44146 | When was the debt incurred? | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | ☐ Debtor 1 only | ☐ Contingent | | | | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | | | | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | | | | |
| | Yes | ■ Other. Specify Collection | Agent (Vivint) | | | | |
| 4.3 | Midstate Plumbing & Heating Inc. | Last 4 digits of account number | 5521 | \$104.06 | | | |
| | Nonpriority Creditor's Name 2120 2nd Avenue S Fort Dodge, IA 50501 | When was the debt incurred? | 6/20/2018 | | | | |
| - | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim | s: Check all that apply | | | | |
| | Debtor 1 only | | | | | | |
| | Debtor 2 only | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Unliquidated☐ Disputed☐ | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured claim: | | | | | |
| | ☐ Check if this claim is for a community debt | ☐ Student loans ☐ Obligations arising out of a sepa | ration agreement or divorce that you did not | | | | |
| | Is the claim subject to offset? | report as priority claims | agreement of diverse that you did not | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | |
| | ☐ Yes | Other. Specify Unsecured | Debt | | | | |

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| Debtor Debtor | 1 Everett Levi Purvis 2 Christina Mae Purvis | | Case number (if know) | |
|------------------|--|---|--|------------|
| 4.3 | Nature's Rain Lawn Care | Last 4 digits of account number | | Unknown |
| | Nonpriority Creditor's Name PO Box 78 Buffalo, MO 65622 | When was the debt incurred? | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify 4623 South | 149th Road, Bolivar, MO | |
| 4.3 | PayPal Credit | Last 4 digits of account number | 5288 | \$4,397.87 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept. PO Box 71202 | When was the debt incurred? | | |
| | Charlotte, NC 28272-1202 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | \square Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Credit Card | <u> </u> | |
| 4.3 | RISE | Last 4 digits of account number | 8080 | \$4,228.00 |
| | Nonpriority Creditor's Name Attn: Bankruptcy PO Box 101808 Fort Worth, TX 76185 | When was the debt incurred? | Opened 7/18/18 Last Active 07/18 | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ■ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt | | ration agreement or divorce that you did not | |
| | Is the claim subject to offset? | report as priority claims Debts to pension or profit-sharin | a plans, and other similar debts | |
| | _ | , , | • • | |
| | ☐ Yes | Other. Specify Unsecured | Dept | |

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| Debtor 2 Christina Mae Purvis | | | | |
|-------------------------------|---|---|--|----------|
| 4.3 | Royal Oaks Hospital | Last 4 digits of account number | 3912 | Unknown |
| 5 | Nonpriority Creditor's Name Attn: Bankruptcy Dept. 307 North Main | When was the debt incurred? | 7/24/2018 - 8/13/2018 | |
| | Windsor, MO 65360 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | | |
| | Debtor 1 only | | | |
| | Debtor 2 only | ☐ Contingent☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | ☐ Obligations arising out of a sepa report as priority claims | ration agreement or divorce that you did not | |
| | ■ No | ☐ Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Medical De | bt | |
| 4.3 | Southwest Electric Coop | Last 4 digits of account number | 6001 | \$361.09 |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept. 1023 S. Springfield Ave. | When was the debt incurred? | | |
| | Bolivar, MO 65613 Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| | ☐ Debtor 1 only | ☐ Contingent | | |
| | ☐ Debtor 2 only | ☐ Unliquidated | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | Yes | Other. Specify Unsecured | Debt | |
| 4.3 | Sunshine Eye Clinic Nonpriority Creditor's Name | Last 4 digits of account number | 8771 | \$228.00 |
| | 1441 E. Sunshine Springfield, MO 65804-1211 | When was the debt incurred? | | |
| | Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| | Who incurred the debt? Check one. | _ | | |
| | Debtor 1 only | ☐ Contingent | | |
| | Debtor 2 only | ☐ Unliquidated | | |
| | Debtor 1 and Debtor 2 only | Disputed | d alaim. | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured ☐ Student loans | ı cıaım: | |
| | ☐ Check if this claim is for a community debt Is the claim subject to offset? | _ | ration agreement or divorce that you did not | |
| | ■ No | Debts to pension or profit-sharin | g plans, and other similar debts | |
| | □ Yes | ■ Other. Specify Medical De | | |
| | | - Other Opcomy | | |

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| | Christina Mae Purvis | | Case number (if know) | | | | | | |
|-----|--|--|---|----------|--|--|--|--|--|
| 4.3 | Sunshine Eye Clinic | Last 4 digits of account number | 8770 | \$10.00 | | | | | |
| | Nonpriority Creditor's Name 1441 E. Sunshine | When was the debt incurred? | | | | | | | |
| | Springfield, MO 65804-1211 Number Street City State Zlp Code | As of the date you file, the claim | | | | | | | |
| | Who incurred the debt? Check one. | | | | | | | | |
| | Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ■ Debtor 1 and Debtor 2 only | ☐ Disputed | <u> </u> | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | aration agreement or divorce that you did not | | | | | | |
| | No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | Yes | Other. Specify Medical De | bt | | | | | | |
| 4.3 | Synchrony Bank/Lowe's | Last 4 digits of account number | 9815 | \$489.00 | | | | | |
| | Nonpriority Creditor's Name | _ | Opened 06/47 Least Active | | | | | | |
| | Attn: Bankruptcy Dept PO Box 965060 Orlando, FL 32896 | When was the debt incurred? | Opened 06/17 Last Active 6/05/18 | | | | | | |
| | Number Street City State Zlp Code Who incurred the debt? Check one. | t City State Zlp Code As of the date you file, the claim is: Check all that apply | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | ☐ At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | ☐ Student loans | | | | | | | |
| | debt | Obligations arising out of a sepa | aration agreement or divorce that you did not | | | | | | |
| | Is the claim subject to offset? | report as priority claims | | | | | | | |
| | ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | | | | | | |
| | Yes | Other. Specify Charge Acc | count | | | | | | |
| 4.4 | Synchrony Bank/Select Comfort | Last 4 digits of account number | 0866 | \$359.00 | | | | | |
| | Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 965060 | When was the debt incurred? | Opened 06/17 Last Active 8/20/18 | | | | | | |
| | Orlando, FL 32896 | When was the dest mounted. | 0/20/10 | | | | | | |
| | Number Street City State Zlp Code | As of the date you file, the claim | is: Check all that apply | | | | | | |
| | Who incurred the debt? Check one. | | | | | | | | |
| | ■ Debtor 1 only | ☐ Contingent | | | | | | | |
| | Debtor 2 only | ☐ Unliquidated | | | | | | | |
| | ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | | | | | | |
| | \square At least one of the debtors and another | Type of NONPRIORITY unsecure | d claim: | | | | | | |
| | ☐ Check if this claim is for a community | Student loans | | | | | | | |
| | debt | Obligations arising out of a sepa | | | | | | | |
| | Is the claim subject to offset? | report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts | | | | | | | |
| | ■ No | | | | | | | | |
| | ☐ Yes | Other. Specify Charge Ace | count | | | | | | |

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| 2 Christina Mae Purvis | | Case number (if know) | |
|--|--|--|-------------|
| Synchrony Bank/Walmart | Last 4 digits of account number | 8139 | \$1,741.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept PO Box 965060 | When was the debt incurred? | Opened 11/15 Last Active 7/15/18 | |
| Orlando, FL 32896 Number Street City State Zlp Code | As of the date you file, the claim i | | |
| Who incurred the debt? Check one. | • | | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ■ Debtor 2 only | ☐ Unliquidated | | |
| ☐ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Charge Acc | count | |
| USAA Federal Savings Bank | Last 4 digits of account number | 4468 | \$15,419.00 |
| Nonpriority Creditor's Name | | | ****,****** |
| Attn: Bankruptcy Dept. 10750 McDermott Freeway San Antonio, TX 78288 | When was the debt incurred? | Opened 08/15 Last Active 7/22/18 | |
| Number Street City State Zlp Code Who incurred the debt? Check one. | As of the date you file, the claim i | s: Check all that apply | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration agreement or divorce that you did not | |
| ■ No | Debts to pension or profit-sharing | g plans, and other similar debts | |
| Yes | Other. Specify Credit Card | <u> </u> | |
| USAA Federal Savings Bank | Last 4 digits of account number | 8834 | \$15,419.00 |
| Nonpriority Creditor's Name Attn: Bankruptcy Dept. 10750 McDermott Freeway | When was the debt incurred? | Opened 8/12/15 Last Active 7/22/18 | |
| San Antonio, TX 78288 Number Street City State Zlp Code | As of the date you file, the claim i | s: Check all that apply | |
| Who incurred the debt? Check one. | - | | |
| ☐ Debtor 1 only | ☐ Contingent | | |
| ☐ Debtor 2 only | ☐ Unliquidated | | |
| ■ Debtor 1 and Debtor 2 only | ☐ Disputed | | |
| ☐ At least one of the debtors and another | Type of NONPRIORITY unsecured | d claim: | |
| ☐ Check if this claim is for a community | ☐ Student loans | | |
| debt Is the claim subject to offset? | report as priority claims | ration agreement or divorce that you did not | |
| No | Debts to pension or profit-sharing | | |
| Yes | Other. Specify Unsecured | Debt | |

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| Makat | | | | | | |
|--------------------------------------|---|---|---|-------------------|---|------------------------|
| | | unty Treasurer ditor's Name | Last 4 digits of account number | 9155 | | \$1,508.0 |
| Jan M | esserl entral | ly Avenue | When was the debt incurred? | 2017 | 7 | |
| Number | Street C | , IA 50501 City State Zlp Code he debt? Check one. | As of the date you file, the claim | is: Chec | ck all that apply | |
| ☐ Debt | or 1 only | y | ☐ Contingent | | | |
| ☐ Debt | or 2 only | у | ☐ Unliquidated | | | |
| Debt | or 1 and | Debtor 2 only | ☐ Disputed | | | |
| ☐ At lea | ast one | of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Chec | ck if this | s claim is for a community | ☐ Student loans | | | |
| debt | | bject to offset? | ☐ Obligations arising out of a separeport as priority claims | ration a | greement or divorce that you did not | |
| ■ No | | | Debts to pension or profit-sharing | ıg plans, | , and other similar debts | |
| ☐ Yes | | | Other. Specify Property Ta | axes | | |
| | | Dealer Services | Last 4 digits of account number | 0610 |) | Unknow |
| | Bankrı ox 196 | | When was the debt incurred? | Ope: 8/18/ | ned 03/16 Last Active /17 | |
| Number | Street C | City State ZIp Code he debt? Check one. | As of the date you file, the claim | is: Chec | ck all that apply | |
| ☐ Debt | or 1 only | у | ☐ Contingent | | | |
| ☐ Debt | or 2 only | у | ☐ Unliquidated | | | |
| ■ Debt | or 1 and | d Debtor 2 only | Disputed | | | |
| ☐ At lea | ast one | of the debtors and another | Type of NONPRIORITY unsecured | d claim: | | |
| ☐ Chec | ck if this | s claim is for a community | ☐ Student loans | | | |
| debt | | bject to offset? | Obligations arising out of a separeport as priority claims | ration a | greement or divorce that you did not | |
| ■ No | | | Debts to pension or profit-sharing | ıg plans, | , and other similar debts | |
| ☐ Yes | | | Other. Specify Automobile | Loan | 1 | |
| nis page o | only if y llect froi n one c y debts | m you for a debt you owe to som | out your bankruptcy, for a debt that y neone else, list the original creditor in you listed in Parts 1 or 2, list the addi submit this page. | Parts 1 | ady listed in Parts 1 or 2. For example l or 2, then list the collection agency h reditors here. If you do not have addit | ere. Similarly, if you |
| | | | | eporting | g purposes only. 28 U.S.C. §159. Add t | he amounts for eac |
| Add | | | s. This information is for statistical r | | | |
| Add the amou | ired cla | im. | is. This information is for statistical r | _ | Total Claim | |
| Add the amou of unsecu | | | s. This information is for statistical r | 6a. | Total Claim \$ | |
| Add the amou of unsecu | ured cla 6a. 6b. | im. Domestic support obligations Taxes and certain other debts | you owe the government | 6b. | \$ | |
| Add the amount of unsecut Total aims | 6a. 6b. 6c. | Domestic support obligations Taxes and certain other debts of Claims for death or personal in | you owe the government jury while you were intoxicated | 6b. 6c. | \$ 0.00 \$ 0.00 \$ 0.00 | |
| Add the amou of unsecu | ured cla 6a. 6b. | Domestic support obligations Taxes and certain other debts of Claims for death or personal in | you owe the government | 6b. | \$ | |
| Add the amou of unsecu | 6a. 6b. 6c. | Domestic support obligations Taxes and certain other debts of Claims for death or personal in | you owe the government jury while you were intoxicated cured claims. Write that amount here. | 6b. 6c. | \$ 0.00 \$ 0.00 \$ 0.00 | |
| Add the amount of unsecut Total aims | 6a. 6b. 6c. 6d. | Domestic support obligations Taxes and certain other debts y Claims for death or personal in Other. Add all other priority unser | you owe the government jury while you were intoxicated cured claims. Write that amount here. | 6b. 6c. 6d. | \$ 0.00 \$ 0.00 \$ 0.00 \$ 0.00 | |

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Debtor 1 Everett Levi Purvis Debtor 2 Christina Mae Purvis Case number (if know) from Part 2 Obligations arising out of a separation agreement or divorce that 0.00 you did not report as priority claims

Debts to pension or profit-sharing plans, and other similar debts 6g. 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i. 76,131.42 Total Nonpriority. Add lines 6f through 6i. 93,330.42 Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main

| | | DOMINI | 311 1 U(K) 7 U (J 1 1 | |
|---------------------|--------------------------|--------------------|-----------------------|--|
| Fill in this infor | mation to identify your | case: | | |
| Debtor 1 | Everett Levi Purv | ris | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Christina Mae Pu | rvis | | |
| (Spouse if, filing) | First Name | Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: | WESTERN DISTRICT (| OF MISSOURI | |
| Case number | | | | |
| (if known) | | | | |

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code

2.1 800 South Saught Saught

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| | | Docume | nt Page 47 o | <u>f 71</u> |
|------------------------|--|--------------------------------|---------------------------|---|
| Fill in this | information to identify your | case: | | |
| Debtor 1 | Everett Levi Purv | ris | | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | Christina Mae Pu | rvis | | |
| Spouse if, filin | ng) First Name | Middle Name | Last Name | |
| Jnited Stat | tes Bankruptcy Court for the: | WESTERN DISTRICT C | F MISSOURI | |
| | | | | |
| Case numb if known) | per | | | ☐ Check if this is an |
| , | | | | amended filing |
| | | | | |
| Official | Form 106H | | | |
| | ule H: Your Cod | ohtors | | 42/45 |
| <u>scrieu</u> | ule n. Tour Cou | enroi 2 | | 12/15 |
| 1. Do y | you have any codebtors? (If | you are filing a joint case, o | lo not list either spouse | as a codebtor. |
| ■ No □ Yes | | | | |
| | nin the last 8 years, have you a, California, Idaho, Louisiana | | | 1? (Community property states and territories include ngton, and Wisconsin.) |
| ■ No. | Go to line 3. | | | |
| ☐ Yes. | . Did your spouse, former spo | use, or legal equivalent live | with you at the time? | |
| in line Form 1 | 2 again as a codebtor only i | f that person is a guarant | or or cosigner. Make s | if your spouse is filing with you. List the person shown sure you have listed the creditor on Schedule D (Official 6G). Use Schedule D, Schedule E/F, or Schedule G to fill |
| | Column 1: Your codebtor Name, Number, Street, City, State and Z | IP Code | | Column 2: The creditor to whom you owe the debt Check all schedules that apply: |
| 2.4 | | | | Cahadula D. lina |
| 3.1 | Name | | | _ □ Schedule D, line □ Schedule E/F, line |
| | | | | ☐ Schedule E/F, line |
| _ | | | | |
| | Number Street | Stato | ZIP Code | |
| | City | State | ZIF Code | |
| 3.2 | | | | ☐ Schedule D, line |
| | Name | | | ☐ Schedule B/, line |
| | | | | ☐ Schedule G, line |
| _ | Number Otto | | | |
| | Number Street City | State | ZIP Code | |
| | · · | | | |

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| Fill | in this information to id | entify your c | ase: | | | | | | | | |
|--------------------|--|---|--|--|-------------|---------------|---|----------------------|-------------------|-----------------------|-----------------|
| De | btor 1 E | verett Levi | Purvis | | | | | | | | |
| | btor 2 Couse, if filing) | hristina Ma | ae Purvis | | | | | | | | |
| Un | ited States Bankruptcy | Court for the | : WESTERN DISTRICT | OF MISSOURI | | _ | | | | | |
| (If k | se number nown) | | | | | | Check if this is: An amende A supplement income | ed filing ent sho | , wing po | | |
| <u>O</u> | fficial Form 1 | <u>061</u> | | | | | MM / DD/ Y | YYY | | | |
| S | chedule I: Yo | our Inc | ome | | | | | | | | 12/15 |
| sup spo atta | pplying correct informations. If you are separa | ation. If you ited and you o this form. | sible. If two married peo are married and not filin ir spouse is not filing wi On the top of any addition | ng jointly, and your th you, do not inclu | spouse i | s liv nati | ing with you, incl on about your spo | ude in ouse. I | formati f more | ion about space is | your needed, |
| 1. | Fill in your employn information. | nent | | Debtor 1 | | | Debtor 2 | 2 or no | n-filing | g spouse | |
| | If you have more that | | Employment status | ☐ Employed | | | ☐ Emple | ☐ Employed | | | |
| | attach a separate paginformation about add employers. | 9 - | | ■ Not employed | | | ■ Not e | mploye | ed | | |
| | Include part-time, sea self-employed work. | asonal, or | Occupation Employer's name | | | | | | | | |
| | Occupation may inclu or homemaker, if it a | | Employer's address | | | | | | | | |
| | | | How long employed the | nere? | | | | | | | |
| Pa | rt 2: Give Details | s About Moi | nthly Income | | | | | | | | |
| | imate monthly income use unless you are sep | | ate you file this form. If y | you have nothing to r | eport for | any | ine, write \$0 in the | space | . Includ | le your noi | n-filing |
| | ou or your non-filing spore space, attach a separ | | ore than one employer, co | ombine the information | n for all e | empl | oyers for that perso | on on th | ne lines | below. If | you need |
| | | | | | | | For Debtor 1 | | Debton-filing | r 2 or spouse | |
| 2. | | | ry, and commissions (becalculate what the month) | | 2. | \$ | 0.00 | \$_ | | 0.00 | |
| 3. | Estimate and list me | onthly overt | ime pay. | | 3. | +\$ | 0.00 | +\$ | | 0.00 | |
| 4. | Calculate gross Inc | ome. Add lir | ne 2 + line 3. | | 4. | \$ | 0.00 | \$ | | 0.00 | |

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| Deb | tor 1 tor 2 | Everett Levi Purvis Christina Mae Purvis | _ | Ca | ase number (if i | known) | | | | |
|-----|----------------|--|-----------------|------|------------------|--------------|------------|--------|-------------|-----------------|
| | | | | F | For Debtor 1 | | | Debtor | | |
| | Cop | by line 4 here | 4. | \$ | S | 0.00 | \$ | | 0.00 | - |
| 5. | List | all payroll deductions: | | | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 3 | 0.00 | \$ | | 0.00 | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ | | 0.00 | * - | | 0.00 | - |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | | 0.00 | \$ | | 0.00 | - |
| | 5e. | Insurance | 5e. | \$ | | 0.00 | \$ | | 0.00 | _ |
| | 5f. | Domestic support obligations | 5f. | \$ | | 0.00 | \$ | | 0.00 | - |
| | 5g. | Union dues | 5g. | \$ | | 0.00 | \$ | | 0.00 | - |
| | 5h. | Other deductions. Specify: | 5h.+ | + \$ | 3 | 0.00 | + \$ | | 0.00 | _ |
| 6. | Add | the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ | | 0.00 | \$ | | 0.00 | _ |
| 7. | Cal | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | \$ | | 0.00 | \$ | | 0.00 | |
| 8. | List 8a. | all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. | 8a. | \$ | | 0.00 | \$ | | 0.00 | - |
| | 8b. | Interest and dividends | 8b. | \$ | | 0.00 | - \$ \$ | | 0.00 | _ |
| | 8c. | Family support payments that you, a non-filing spouse, or a dependen regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | | \$ | · | 0.00 | * | | 0.00 | - |
| | 8d. | Unemployment compensation | 8d. | \$ | 1.75 | 4.40 | \$ | | 0.00 | _ |
| | 8e. | Social Security | 8e. | \$ | | 0.00 | \$ | 1. | 903.90 | _ |
| | 8f. 8g. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: VA Disability Benefits Pension or retirement income | e 8f. 8g. | \$ | | 1.15 0.00 | \$_ \$_ | | 0.00 | - |
| | 8h. | Other monthly income. Specify: | 8h.+ | - \$ | | 0.00 | + \$ | | 0.00 | _ |
| 9. | Add | all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$_ | 2,30 | 5.55 | \$_ | | 1,903.90 | 0 |
| 10 | Cal | culate monthly income. Add line 7 + line 9. | 10. \$ | | 2,305.55 | 1 6 | 1 | 003 00 | = \$ | 4 200 45 |
| 10. | | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | 10. ψ | _ | 2,303.33 | ┤ ╹ | | 903.90 | _ | 4,209.45 |
| 11. | Incli othe | te all other regular contributions to the expenses that you list in <i>Schedula</i> ude contributions from an unmarried partner, members of your household, you er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not cify: | r depen | | , , | | • | | Э J. +\$ | 0.00 |
| 12. | | I the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certallies | | | | | | 12. | \$ | 4,209.45 |
| | | | | | | | | | Combin | ned y income |
| 13. | Do : | you expect an increase or decrease within the year after you file this form No. | 1? | | | | | | | , |
| | | Yes. Explain: | | | | | | | | |
| | | · | | | | | | | | |

| | | | | | | - | | |
|-----------|----------------------------|--|-------------------|--|--|-------------------------------------|---|---|
| Fill | in this informa | tion to identify yo | our case: | | | | | |
| Deb | otor 1 | Everett Levi | Purvis | | | Che | ck if this is: | |
| | | | | | | | An amended filing | |
| | otor 2 ouse, if filing) | Christina Ma | e Purvis | | | | A supplement show 13 expenses as of | ving postpetition chapter the following date: |
| | | | | | | | · | |
| Unit | ted States Bankr | uptcy Court for the | : WESTE | ERN DISTRICT OF MISSO | DURI | | MM / DD / YYYY | |
| Cas | se number | | | | | | | |
| (If k | (nown) | | | | | | | |
| \bigcap | fficial Fo | rm 106J | | | | 1 | | |
| | | | Evnor | 1000 | | | | 40/4 |
| | | J: Your I | | Iろせる . If two married people ar | e filing together h | oth are equ | ıally responsible fo | 12/1 |
| info | ormation. If m | | eded, atta | ch another sheet to this | | | | |
| Par | rt 1: Descr | ibe Your House | hold | | | | | |
| 1. | Is this a joir | nt case? | | | | | | |
| | ☐ No. Go to | | | | | | | |
| | Yes. Doe | s Debtor 2 live i | in a separ | ate household? | | | | |
| | ■ N | 0 | | | | | | |
| | □ Y | es. Debtor 2 mus | st file Offici | al Form 106J-2, Expenses | for Separate House | ehold of Deb | otor 2. | |
| 2. | Do you have | e dependents? | □ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents | | | | Son | | 6 | Yes |
| | | | | | _ | | _ | □ No |
| | | | | | Daughter | | _ 7 | Yes |
| | | | | | Son | | 13 | ■ No |
| | | | | | 3011 | | | ☐ Yes ☐ No |
| | | | | | | | | ☐ Yes |
| 3. | expenses o | penses include f people other tl d your depende | ^{han} ┌┐ | No Yes | | | | |
| | | | 1113: | | | | | |
| Est | timate your ex | ate Your Ongoing the Your Ongoing the See as of your of the See after th | our bankr | ly Expenses uptcy filing date unless y y is filed. If this is a supp | ou are using this followed | orm as a si e <i>J</i> , check t | upplement in a Cha he box at the top o | apter 13 case to report f the form and fill in the |
| Inc. | luda avnanca | s poid for with a | non ooch | aovornment accietance i | f vou know | | | |
| the | | n assistance and | | government assistance i luded it on Schedule I: \ | | | Your exp | enses |
| | | _ | | | | | | |
| 4. | | or home owners and any rent for the | | ses for your residence. I or lot. | nclude first mortgag | e 4. : | \$ | 1,360.00 |
| | If not includ | led in line 4: | | | | | | |
| | 4a. Real e | estate taxes | | | | 4a. S | \$ | 0.00 |
| | • | rty, homeowner's | | | | 4b. 3 | · | 0.00 |
| | | • | | upkeep expenses | | 4c. | · | 0.00 |
| 5. | | owner's associat nortgage payme | | dominium dues our residence, such as ho | me equity loans | 4d. 5 | | 0.00 |
| | | | | | | | | |

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| | tor 1 | | Levi Purvis | _ | | |
|-----|--------|---------------|---|-------------------------|---------------------|--------------------------|
| ⊔eb | tor 2 | Christina | a Mae Purvis | Case numl | ber (if known) | |
| 6. | Utilit | ties: | | | | |
| 0. | 6a. | | heat, natural gas | 6a. | \$ | 125.00 |
| | 6b. | | ver, garbage collection | 6b. | · | 0.00 |
| | 6c. | | e, cell phone, Internet, satellite, and cable services | 6c. | · | 150.00 |
| | 6d. | Other. Spe | | 6d. | \$ | 0.00 |
| 7. | | | ekeeping supplies | 7. | \$ | 750.00 |
| 8. | | | hildren's education costs | 8. | \$ | 0.00 |
| 9. | | | ry, and dry cleaning | 9. | \$ | 75.00 |
| | | _ | products and services | 10. | \$ | 25.00 |
| 11. | | • | ntal expenses | 11. | · | 0.00 |
| | | | Include gas, maintenance, bus or train fare. | 11. | Ψ | 0.00 |
| 12. | | | ar payments. | 12. | \$ | 150.00 |
| 13. | | | clubs, recreation, newspapers, magazines, and books | 13. | \$ | 50.00 |
| | | | ributions and religious donations | 14. | \$ | 0.00 |
| | | rance. | institution and rengious demailers | | Ψ | 0.00 |
| 10. | | | surance deducted from your pay or included in lines 4 or 2 | 20. | | |
| | | Life insura | | 15a. | \$ | 0.00 |
| | | Health insu | | 15b. | \$ | 0.00 |
| | 15c | Vehicle ins | surance | 15c. | · - | 240.00 |
| | | | rance. Specify: | 15d. | · | 0.00 |
| 16 | | | clude taxes deducted from your pay or included in lines 4 | | Ψ | 0.00 |
| 10. | Spec | | cidde taxes deducted from your pay or included in lines 4 | 16. | \$ | 0.00 |
| 17. | | - | ease payments: | | - | 0.00 |
| ••• | | | ents for Vehicle 1 | 17a. | \$ | 519.93 |
| | | | ents for Vehicle 2 | 17b. | · | 475.00 |
| | | Other. Spe | | 17c. | · | 0.00 |
| | | Other. Spe | | 17d. | * | 0.00 |
| 1Ω | | | of alimony, maintenance, and support that you did no | | Ψ | 0.00 |
| 10. | | | your pay on line 5, Schedule I, Your Income (Official F | | \$ | 0.00 |
| 19. | | | s you make to support others who do not live with you | | \$ | 0.00 |
| | Spec | | , | 19. | - | 0.00 |
| 20. | • | , | erty expenses not included in lines 4 or 5 of this form | | our Income. | |
| | | | s on other property | 20a. | | 0.00 |
| | 20b. | Real estate | e taxes | 20b. | \$ | 0.00 |
| | | | nomeowner's, or renter's insurance | 20c. | | 0.00 |
| | | | ice, repair, and upkeep expenses | 20d. | · | 0.00 |
| | | | er's association or condominium dues | 20e. | * | 20.00 |
| 21. | | er: Specify: | | 21. | · | 245.00 |
| ۷۱. | Othe | opecity. | Student Loan Payments | | ΤΨ | 245.00 |
| 22. | Calc | ulate your r | monthly expenses | | | |
| | 22a. | Add lines 4 | through 21. | | \$ | 4,184.93 |
| | 22b. | Copy line 22 | 2 (monthly expenses for Debtor 2), if any, from Official For | m 106J-2 | \$ | |
| | | | a and 22b. The result is your monthly expenses. | | \$ | 4,184.93 |
| | 220. | 7100 1110 220 | a and 225. The result is your morning expenses. | | Ψ ——— | 4,104.93 |
| 23. | | | monthly net income. | | | _ |
| | 23a. | Copy line | 12 (your combined monthly income) from Schedule I. | 23a. | \$ | 4,209.45 |
| | 23b. | Copy your | monthly expenses from line 22c above. | 23b. | -\$ | 4,184.93 |
| | | | | | | |
| | 23c. | | our monthly expenses from your monthly income. | 00 | Φ. | 24.52 |
| | | The result | is your monthly net income. | 23c. | \$ | 24.52 |
| ٠, | _ | | | | | |
| 24. | | | an increase or decrease in your expenses within the your expect to finish paying for your car loan within the year or do yo | | | or degrees because of a |
| | | | ou expect to tinish paying for your car loan within the year or do you terms of your mortgage? | u expect your mongage p | Dayment to increase | or decrease because of a |
| | ■ No | | ,gwg | | | |
| | | | Fundain hassa | | | |
| | ☐ Ye | es. | Explain here: | | | |

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| Debtor 1 | | | |
|--|--|---|--|
| Dedior | Everett Levi Pur | vis | |
| 20210 | First Name | Middle Name Last Name | |
| Debtor 2 | Christina Mae P | urvis | |
| (Spouse if, filing) | First Name | Middle Name Last Name | |
| United States B | ankruptcy Court for the: | WESTERN DISTRICT OF MISSOURI | |
| Case number | | | |
| (if known) | | | ☐ Check if this is an |
| | | | amended filing |
| · You must file th obtaining mone | is form whenever you | er, both are equally responsible for supplying correct informatile bankruptcy schedules or amended schedules. Making a fain connection with a bankruptcy case can result in fines up to 1519, and 3571. | alse statement, concealing property, or |
| | | | |
| Sig | gn Below | | |
| | | neone who is NOT an attorney to help you fill out bankruptcy fo | orms? |
| | | neone who is NOT an attorney to help you fill out bankruptcy fo | orms? |
| Did you p | | Att | orms? Each Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119) |
| Did you particle. No □ Yes. | ay or agree to pay som Name of person | Att | cach Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119) |
| Did you positive in the positi | ay or agree to pay som Name of person alty of perjury, I declare | Att De | each Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119) |
| Did you positive in the second of the second | ay or agree to pay som Name of person alty of perjury, I declare true and correct. | Att De e that I have read the summary and schedules filed with this d | each Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119) |
| Did you positive in the second of the second | ay or agree to pay som Name of person alty of perjury, I declare true and correct. | Att De e that I have read the summary and schedules filed with this d X _/s/ Christina Mae Pur | each Bankruptcy Petition Preparer's Notice, eclaration, and Signature (Official Form 119) |

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| Fill | in this inforn | nation to identify you | r case: | | | | | |
|--------------------|----------------------------|---|---|-------------|----------------------------|--------------------|------------|-------------------------------------|
| Deb | otor 1 | Everett Levi Pu | rvis | | | | | |
| L . | _ | First Name | Middle Name | | Last Name | | | |
| | otor 2 ouse if, filing) | Christina Mae P | Middle Name | | Last Name | | | |
| | | nlementary Court for the | | DE MICO | | | | |
| Uni | ted States Bal | nkruptcy Court for the: | WESTERN DISTRICT (| JF 1VII 330 | JURI | | | |
| | se number | | | | | | _ | heck if this is an mended filing |
| Sta | | of Financial | Affairs for Indivi | | | | | 4/1 |
| info num | rmation. If m | ore space is needed n). Answer every que | | o this for | m. On the top of an | | | |
| Par | Give L | Details About Your M | arital Status and Where Yo | u Lived | Before | | | |
| 1. | What is you | r current marital stat | us? | | | | | |
| | Married | | | | | | | |
| | □ Not mar | rried | | | | | | |
| 2. | During the la | ast 3 years, have you | lived anywhere other than | n where | you live now? | | | |
| | □ No | | | | | | | |
| | Yes. Lis | st all of the places you | lived in the last 3 years. Do | not includ | de where you live nov | v. | | |
| | Debtor 1 Pr | ior Address: | Dates Debtor lived there | 1 | Debtor 2 Prior Ad | Idress: | | Dates Debtor 2 lived there |
| | 4623 S. 14 Bolivar, M | | From-To: 6/2017 to 8/2 | :018 | ■ Same as Debtor | 1 | | Same as Debtor 1 From-To: |
| | 916 2nd A Fort Dodg | venue N e, IA 50501 | From-To: 6/2015 to 6/2 | :017 | ■ Same as Debtor | 1 | | Same as Debtor 1 From-To: |
| 3. state | | | ver live with a spouse or lealifornia, Idaho, Louisiana, N | | | | | |
| | No | | | | | | | |
| | ☐ Yes. Ma | ake sure you fill out Sc | hedule H: Your Codebtors (0 | Official Fo | orm 106H). | | | |
| Par | t 2 Explai | in the Sources of You | ır İncome | | | | | |
| | | | | | | | | |
| 4. | Fill in the total | al amount of income yo | mployment or from operation received from all jobs and a have income that you recei | d all busin | esses, including part | -time activities. | ious calen | dar years? |
| | □ No | | | | | | | |
| | Yes. Fill | I in the details. | | | | | | |
| | | | Debtor 1 | | | Debtor 2 | | |
| | | | Sources of income | Gro | ss income | Sources of incom | me | Gross income |
| | | | Check all that apply. | | ore deductions and usions) | Check all that app | oly. | (before deductions and exclusions) |

Official Form 107 Statement of Financial Affairs for Individuals Filing for Bankruptcy

Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Case 18-61081-can7 Doc 1 Page 54 of 71 Document **Everett Levi Purvis** Debtor 2 Christina Mae Purvis Case number (if known) Debtor 1 Debtor 2 Sources of income Sources of income **Gross income Gross income** Check all that apply. (before deductions and Check all that apply. (before deductions exclusions) and exclusions) From January 1 of current year until \$9,900.25 \$0.00 ☐ Wages, commissions, Wages, commissions, the date you filed for bankruptcy: bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For last calendar year: \$57,142.75 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2017) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business For the calendar year before that: \$48,335.00 \$0.00 ☐ Wages, commissions, Wages, commissions, (January 1 to December 31, 2016) bonuses, tips bonuses, tips ☐ Operating a business ☐ Operating a business Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. ☐ No Yes. Fill in the details. Debtor 1 Debtor 2 Sources of income **Gross income from** Sources of income **Gross income** Describe below. each source Describe below. (before deductions (before deductions and and exclusions) exclusions) From January 1 of current year until \$0.00 **Social Security** \$16,024.00 the date you filed for bankruptcy: **Benefits** Unemployment \$6,811.20 For last calendar year: \$0.00 **Social Security** \$24,036.00 (January 1 to December 31, 2017) **Benefits** For the calendar year before that: \$0.00 **Social Security** \$24,036.00 (January 1 to December 31, 2016) **Benefits**

Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425* or more?

☐ No. Go to line 7.

☐ Yes List below each creditor to whom you paid a total of \$6,425* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

^{*} Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.

Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Page 55 of 71 Document **Everett Levi Purvis** Debtor 2 Christina Mae Purvis Case number (if known) Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? □ No. Go to line 7. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Creditor's Name and Address **Dates of payment Total amount** Amount you Was this payment for ... still owe paid **Credit Acceptance** 7/23/2018 \$950.00 \$20,527.00 ■ Mortgage 25505 West 12 Mile Road 8/23/2018 Car **Suite 3000** ☐ Credit Card Southfield, MI 48034 ☐ Loan Repayment ☐ Suppliers or vendors □ Other **USAA Federal Savings Bank** 6/21/2018 \$1.559.79 \$21.064.00 ■ Mortgage Attn: Bankruptcy 7/21/2018 Car 10750 McDermott Freeway 8/21/2018 ☐ Credit Card San Antonio, TX 78288 ☐ Loan Repayment ☐ Suppliers or vendors □ Other Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No ☐ Yes. List all payments to an insider. Insider's Name and Address Amount you Reason for this payment **Dates of payment Total amount** paid still owe Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider **Insider's Name and Address Dates of payment Total amount** Amount you Reason for this payment

Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

☐ Yes. Fill in the details.

Case title Nature of the case Court or agency Status of the case
Case number

paid

still owe

Part 4: Identify Legal Actions, Repossessions, and Foreclosures

Include creditor's name

Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Page 56 of 71 Document **Everett Levi Purvis** Debtor 2 Christina Mae Purvis Case number (if known) Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below **Creditor Name and Address Describe the Property** Date Value of the property Explain what happened 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value per person the gifts Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ■ No Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed Charity's Name Address (Number, Street, City, State and ZIP Code)

Part 6: List Certain Losses

Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No

Yes. Fill in the details.

Describe the property you lost and how the loss occurred

Describe any insurance coverage for the loss

Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.

Date of your loss

Value of property lost

Part 7: List Certain Payments or Transfers

Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No

Yes. Fill in the details.

Person Who Was Paid Address **Email or website address** Person Who Made the Payment, if Not You Description and value of any property transferred

Date payment or transfer was made

Amount of payment

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

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| | btor 2 Christina Mae Purvis | | Ca | ase number (| if known) | |
|-----|--|--|---|---------------------|--|-----------------------------|
| | Person Who Was Paid Address Email or website address Person Who Made the Payment, if Not You | transferred | value of any prope | rty | Date payment or transfer was made | Amount o |
| | Shive Law Firm PO Box 777 Bolivar, MO 65613 byron@shivelaw.com Debtors | Attorney Fees | | | 8/1/2018 | \$1,200.0 |
| | Dollar Learning Foundation, Inc. 21550 Oxnard Street 3rd Floor PMB #001 Woodland Hills, CA 91367 Debtors | Credit Counse | ling Fees | | 8/5/2018 | \$25.0 |
| 17. | Within 1 year before you filed for bankrupto promised to help you deal with your creditor Do not include any payment or transfer that you not | rs or to make payment | | | r transfer any propo | erty to anyone who |
| | Person Who Was Paid Address | Description and transferred | value of any prope | rty | Date payment or transfer was made | Amount o |
| 18. | Within 2 years before you filed for bankrupt transferred in the ordinary course of your be include both outright transfers and transfers may include gifts and transfers that you have alread to No Yes. Fill in the details. Person Who Received Transfer Address | usiness or financial aff ade as security (such as | fairs? the granting of a sent. value of | Describe a payments | or mortgage on you iny property or received or debts | |
| | Person's relationship to you | | | paid in exc | change | |
| 19. | Within 10 years before you filed for bankrup beneficiary? (These are often called asset-pro ■ No □ Yes. Fill in the details. | | ny property to a se | lf-settled tru | st or similar device | of which you are a |
| | Name of trust | Description and | value of the proper | ty transferre | ed | Date Transfer was |
| Pai | tt 8: List of Certain Financial Accounts, Ins | struments, Safe Depos | it Boxes, and Stora | ige Units | | |
| 20. | Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, o houses, pension funds, cooperatives, association of the second seco | or other financial accou | unts; certificates of | | | |
| | Yes. Fill in the details. Name of Financial Institution and | Last 4 digits of | Type of account | or Dat | e account was | Last balanc |
| | Address (Number, Street, City, State and ZIP Code) | Last 4 digits of account number | Type of account instrument | clo | e account was sed, sold, ved, or nsferred | before closing o transfe |
| | United Services Automobile Assn (USAA) 10750 McDermott Freeway San Antonio, TX 78288-9876 | XXXX-4269 | ■ Checking □ Savings □ Money Market □ Brokerage □ Other | | 018 | \$0.0 |

Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Page 58 of 71 Document Debtor 1 **Everett Levi Purvis** Debtor 2 Christina Mae Purvis Case number (if known) Name of Financial Institution and Last 4 digits of Last balance Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred Mass Mutual Life Insurance Co. 9/7/2018 XXXX-1147 \$44.08 ☐ Checking 1295 State Street □ Savings Springfield, MA 01111-0001 ■ Money Market □ Brokerage ■ Other Ollson Associates 401(k) account 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Nο Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, have it? State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Nο Yes. Fill in the details. Name of Storage Facility Who else has or had access Describe the contents Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, State and ZIP Code) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. No Yes. Fill in the details. Value Owner's Name Where is the property? Describe the property (Number, Street, City, State and ZIF Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used

- to own, operate, or utilize it, including disposal sites.
- Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?

| ■ No □ Yes. Fill in the details. | | | |
|--|--|-----------------------------------|----------------|
| Name of site Address (Number, Street, City, State and ZIP Code) | Governmental unit Address (Number, Street, City, State and ZIP Code) | Environmental law, if you know it | Date of notice |

Case 18-61081-can7 Doc 1 Filed 09/27/18 Entered 09/27/18 09:35:43 Desc Main Page 59 of 71 Document **Everett Levi Purvis** Debtor 2 Christina Mae Purvis Case number (if known) 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Name of site Governmental unit Environmental law, if you Date of notice Address (Number, Street, City, State and ZIP Code) Address (Number, Street, City, State and know it **ZIP Code)** 26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders. Nο Yes. Fill in the details. Case Title Court or agency Nature of the case Status of the Case Number Name case Address (Number, Street, City, State and ZIP Code) Part 11: Give Details About Your Business or Connections to Any Business 27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? ☐ A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time A member of a limited liability company (LLC) or limited liability partnership (LLP) ☐ A partner in a partnership ☐ An officer, director, or managing executive of a corporation An owner of at least 5% of the voting or equity securities of a corporation No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. **Employer Identification number Business Name** Describe the nature of the business **Address** Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed 28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. Nο Yes. Fill in the details below. **Date Issued** Address (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Everett Levi Purvis /s/ Christina Mae Purvis **Everett Levi Purvis Christina Mae Purvis** Signature of Debtor 1 Signature of Debtor 2 Date September 19, 2018 Date **September 19, 2018** Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? ■ No ☐ Yes Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

> _. Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Statement of Financial Affairs for Individuals Filing for Bankruptcy

■ No

☐ Yes. Name of Person

Official Form 107

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Debtor 1 **Everett Levi Purvis**Debtor 2 **Christina Mae Purvis**

Case number (if known)

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| Fill in this infor | mation to identify your case: | | |
|----------------------------------|---|---|-----------------------------------|
| Debtor 1 | Everett Levi Purvis | | |
| | First Name Middle Name | Last Name | |
| Debtor 2 | Christina Mae Purvis | | |
| (Spouse if, filing) | First Name Middle Name | Last Name | |
| United States Ba | ankruptcy Court for the: WESTERN DIST | RICT OF MISSOURI | |
| Case number | | | |
| (if known) | | | ☐ Check if this is an |
| | | | amended filing |
| | | | |
| Official Fo | orm 108 | | |
| Statemei | nt of Intention for Indiv | viduals Filing Under Chapte | er 7 12/15 |
| | | - | |
| • | lividual filing under chapter 7, you must fi | Il out this form if: | |
| | re claims secured by your property, or | | |
| You must file thi | ever is earlier, unless the court extends th | not expired. ryou file your bankruptcy petition or by the date se ne time for cause. You must also send copies to the | |
| If two married pe | | oth are equally responsible for supplying correct in | formation. Both debtors must |
| • | | | |
| | and accurate as possible. If more space i our name and case number (if known). | s needed, attach a separate sheet to this form. On | the top of any additional pages, |
| | , , | | |
| Part 1: List Yo | our Creditors Who Have Secured Claims | | |
| 1. For any credit information be | | D: Creditors Who Have Claims Secured by Property | (Official Form 106D), fill in the |
| | reditor and the property that is collateral | What do you intend to do with the property that | |
| | | secures a debt? | as exempt on Schedule C? |
| | | | |
| Creditor's C | Credit Acceptance | ☐ Surrender the property. | □ No |
| name: | | ☐ Retain the property and redeem it. | = |
| Description of | 2017 Mazda Mazda3 35000 miles | Retain the property and enter into a | ■ Yes |
| property | VIN #3MZBN1V77HM128831 | Reaffirmation Agreement. Retain the property and [explain]: | |
| securing debt: | : | Li Retain the property and [explain]. | |
| | | | - |
| Creditor's F | Slagator Book | <u>_</u> | _ |
| | Flagstar Bank | Surrender the property. | No |
| name: | | Retain the property and redeem it. | □Yes |
| Description of | 916 2nd Avenue North Fort | ☐ Retain the property and enter into a Reaffirmation Agreement. | L 163 |
| property | Dodge, IA 50501 Webster | Retain the property and [explain]: | |
| securing debt: | | | _ |
| | | | |
| Creditor's | JSAA Federal Savings Bank | ■ Surrender the property. | ■ No |
| name: | S | Retain the property and redeem it. | _ 110 |
| - | | Retain the property and enter into a | ☐ Yes |
| Description of | • • • • • • • • • • • • • • • • • • • | Reaffirmation Agreement. | |
| | miles | - | |

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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| Debtor 1 Debtor 2 Debtor 2 Debtor 2 Debtor 2 | Case number (if known) | | | | | |
|--|--|--|--|--|--|--|
| property VIN #2G11Z5SA8H9172803 securing debt: | ☐ Retain the property and [explain]: | | | | | |
| Creditor's USAA Federal Savings Bank name: | ☐ Surrender the property. ☐ Retain the property and redeem it. | □ No | | | | |
| Description of property securing debt: 2016 Volkswagen Jetta 14000 miles VIN #3VW637AJ8GM398192 | ■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | ■ Yes | | | | |
| Creditor's USSA Federal Saving name: Bank/Nationstar | ■ Surrender the property. □ Retain the property and redeem it. | ■ No | | | | |
| Description of property MO 65613 Polk County securing debt: | □ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]: | □ Yes | | | | |
| Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in the information below. Do not list real estate leases. Un You may assume an unexpired personal property lease if | I in Schedule G: Executory Contracts and Unex nexpired leases are leases that are still in effec | t; the lease period has not yet ended. 5(p)(2). | | | | |
| Describe your unexpired personal property leases | | Will the lease be assumed? | | | | |
| Lessor's name: | | □ No | | | | |
| Description of leased Property: | | ☐ Yes | | | | |
| Lessor's name: | | □ No | | | | |
| Description of leased Property: | | | | | | |
| Topoly. | | ☐ Yes | | | | |
| Lessor's name: Description of leased | | □ No | | | | |
| Property: | | ☐ Yes | | | | |
| Lessor's name: | | □ No | | | | |
| Description of leased Property: | | ☐ Yes | | | | |
| Lessor's name: | | □ No | | | | |
| Description of leased Property: | | ☐ Yes | | | | |
| | | □ res | | | | |
| Lessor's name: Description of leased | | □ No | | | | |
| Property: | | ☐ Yes | | | | |
| Lessor's name: | | □ No | | | | |
| Description of leased Property: | | _ | | | | |
| | | ☐ Yes | | | | |

Official Form 108

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| - | Everett Levi Purvis Christina Mae Purvis | | Case number (if known) | |
|----------|---|-----|--|--|
| erty tha | t is subject to an unexpired lease. | | any property of my estate that secures a debt and any personal | |
| | erett Levi Purvis | X / | s/ Christina Mae Purvis | |
| | erett Levi Purvis et Levi Purvis | | Christina Mae Purvis | |
| Evere | | | | |

| Fill in this info | ormation to identify your case: | | Ch | eck one | box only as d | irected in | this form and in | Form |
|---|--|--|---------------------------------------|-------------------------|------------------------------------|------------------------------|---|---------------------------|
| Debtor 1 | Everett Levi Purvis | | | 2A-1Sup | ρ. | | | |
| Debtor 2 (Spouse, if filing) | Christina Mae Purvis | | | ■ 1. The | ere is no pres | umption c | of abuse | |
| | Bankruptcy Court for the: Western District o | i Missouri | | ар | plies will be n | nade unde | ine if a presumpter Chapter 7 Me | |
| Case number | · | | | | alculation (Off | | , | |
| (if known) | | | | | | | apply now beca but it could apply | |
| | | | | ☐ Che | ck if this is a | n amend | ded filing | |
| Official F | Form 122A - 1 | | | | | | | |
| Chaptei | 7 Statement of Your Cur | rent Mor | nthly Inc | ome | | | | 12/1 |
| attach a separa case number (i qualifying milit | e and accurate as possible. If two married people a te sheet to this form. Include the line number to we f known). If you believe that you are exempted fro ary service, complete and file Statement of Exempted calculate Your Current Monthly Income your marital and filing status? Check one or | which the addition m a presumption otion from Presum | nal information a of abuse becau | applies. C ise you d | On the top of a o not have prir | ny addition | nal pages, write y sumer debts or b | our name and ecause of |
| ☐ Not r | narried. Fill out Column A, lines 2-11. | | | | | | | |
| ■ Marr | ied and your spouse is filing with you. Fill ou | ut both Columns | A and B, lines | 2-11. | | | | |
| ☐ Marr | ied and your spouse is NOT filing with you. | You and your s | spouse are: | | | | | |
| □Liv | ving in the same household and are not lega | ılly separated. F | Fill out both Co | lumns A | and B, lines 2 | 2-11. | | |
| pe | ring separately or are legally separated. Fill enalty of perjury that you and your spouse are I ring apart for reasons that do not include evading | egally separated | d under nonbar | nkruptcy | law that appli | es or that | | |
| 101(10A). For the 6 months | verage monthly income that you received from all or example, if you are filing on September 15, the 6-m s, add the income for all 6 months and divide the total on the same rental property, put the income from that p | onth period would by 6. Fill in the res | be March 1 thro sult. Do not inclu | ugh Augu: de any inc | st 31. If the amo | ount of your ore than or | r monthly income v nce. For example, | varied during if both |
| | | | | Column Debtor | | Column Debtor non-fili | | |
| | oss wages, salary, tips, bonuses, overtime, leductions). | and commission | ons (before all | \$ | 1,650.04 | \$ | 0.00 | |
| 3. Alimony | y and maintenance payments. Do not include B is filled in. | payments from | a spouse if | \$ | 0.00 | \$ | 0.00 | |
| of you of from an and roor | unts from any source which are regularly partyour dependents, including child support unmarried partner, members of your household mmates. Include regular contributions from a spon on tinclude payments you listed on line 3. | Include regular d, your depender | contributions nts, parents, | \$ | 0.00 | \$ | 0.00 | |
| 5. Net inco | ome from operating a business, profession, | | | | | | | |
| _ | | | otor 1 | | | | | |
| | eceipts (before all deductions) | \$ 0.00 -\$ 0.00 | | | | | | |
| • | and necessary operating expenses athly income from a business, profession, or far | | Copy here -> | . \$ | 0.00 | \$ | 0.00 | |
| | ome from rental and other real property | . п. ф | copy noro | – | | Ψ | | |
| o. Het mice | | Deb | otor 1 | | | | | |
| Gross re | eceipts (before all deductions) | \$ 0.00 | | | | | | |
| | and necessary operating expenses | -\$ 0.00 | | | | | | |
| Net mon | thly income from rental or other real property | \$ 0.00 | Copy here -> | \$ | 0.00 | \$ | 0.00 | |
| 7 Interest | dividends and royalties | | | \$ | 0.00 | \$ | 0.00 | |

Official Form 122A-1

7. Interest, dividends, and royalties

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| Debtor 1 Debtor 2 | | ett Levi Purvis tina Mae Purvis | | | Case nur | mber (if known) | | | |
|----------------------|--------------------|--|--|------------------|------------------|-----------------|------------------------------|----------------|-----------|
| | | | | | Column Debtor | | Column Debtor non-fili | | |
| 8. U r | nemployı | ment compensation | | | \$ | 292.40 | \$ | 0.00 | |
| | | er the amount if you contend that the amount if you contend that the amount if you contend that the amount is the content of t | unt received was a be | enefit und | ler | | | | |
| | For you | | \$ | 0.00 | | | | | |
| | For your | spouse | \$ | 0.00 | | | | | |
| | | r retirement income. Do not include any er the Social Security Act. | amount received that | t was a | \$ | 0.00 | \$ | 0.00 | |
| Do red do | not incluceived as | m all other sources not listed above. So ude any benefits received under the Social a victim of a war crime, a crime against herrorism. If necessary, list other sources of | l Security Act or payr numanity, or internation | ments onal or | | | | | |
| | | | | | \$ | 0.00 | \$ | 0.00 | |
| | | | | | \$ | 0.00 | \$ | 0.00 | |
| | To | tal amounts from separate pages, if any. | | | + \$ | 0.00 | \$ | 0.00 | |
| | | your total current monthly income. Add in. Then add the total for Column A to the | | or \$_ | 1,942.44 | + \$_ | 0.0 | <u>o</u> =[\$_ | 1,942.44 |
| | lculate y | your current monthly income for the ye your total current monthly income from lin | ar. Follow these step | | C | opy line 11 | here=> | \$ | 1,942.44 |
| | Multip | ly by 12 (the number of months in a year) | | | | | | x | 12 |
| 12 | b. The re | esult is your annual income for this part of | the form | | | | | | 23,309.28 |
| 13. C a | lculate t | the median family income that applies t | o you. Follow these | steps: | | | | | |
| Fill | I in the st | ate in which you live. | МО | | | | | | |
| | | umber of people in your household. | 4 | | | | | | |
| То | find a lis | nedian family income for your state and sizes of applicable median income amounts, on. This list may also be available at the ba | go online using the lir | nk specific | ed in the sep | | | 13. \\$ | 83,180.00 |
| 14. H c | w do the | e lines compare? | | | | | | | |
| 14 | a. = | Line 12b is less than or equal to line 13. Go to Part 3. | On the top of page 1 | , check b | ox 1, There | is no presur | mption of a | abuse. | |
| 14 | b. 🗖 | Line 12b is more than line 13. On the top Go to Part 3 and fill out Form 122A-2. | p of page 1, check bo | ox 2, The | presumption | n of abuse is | determine | ed by Form 1 | 22A-2. |
| Part 3: | Sign | n Below | | | | | | | |
| | By sig | ning here, I declare under penalty of perju | ry that the informatio | n on this | statement a | nd in any att | achments | is true and o | orrect. |
| | X /s/ | Everett Levi Purvis | , | X /s/ Cl | nristina Ma | e Purvis | | | |
| | Eve | erett Levi Purvis nature of Debtor 1 | | Chris | tina Mae F | Purvis | | | |
| D | ate Ser | otember 19, 2018 | Dat | e Septe | ember 19, 2 | | | | |
| | If you | checked line 14a, do NOT fill out or file Fo | orm 122A-2. | | | | | | |
| | If you | checked line 14b, fill out Form 122A-2 and | d file it with this form. | | | | | | |

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Debtor 1 Debtor 2 Everett Levi Purvis Christina Mae Purvis

Case number (if known)

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 03/01/2018 to 08/31/2018.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: QCTL / Olsson Associates

Income by Month:

| 6 Months Ago: | 03/2018 | \$1,883.42 |
|---------------|--------------------|------------|
| 5 Months Ago: | 04/2018 | \$0.00 |
| 4 Months Ago: | 05/2018 | \$0.00 |
| 3 Months Ago: | 06/2018 | \$2,858.45 |
| 2 Months Ago: | 07/2018 | \$3,354.57 |
| Last Month: | 08/2018 | \$1,803.81 |
| | Average per month: | \$1,650.04 |

Line 8 - Unemployment compensation (included in CMI)

Source of Income: QCTL / Olsson Associates

Income by Month:

| 6 Months Ago: | 03/2018 | \$0.00 |
|---------------|--------------------|------------|
| 5 Months Ago: | 04/2018 | \$0.00 |
| 4 Months Ago: | 05/2018 | \$0.00 |
| 3 Months Ago: | 06/2018 | \$0.00 |
| 2 Months Ago: | 07/2018 | \$0.00 |
| Last Month: | 08/2018 | \$1,754.40 |
| | Average per month: | \$292.40 |

Non-CMI - Excluded Other Income

Source of Income: VA Disability Benefits

Income by Month:

| 6 Months Ago: | 03/2018 | \$551.15 |
|---------------|--------------------|----------|
| 5 Months Ago: | 04/2018 | \$551.15 |
| 4 Months Ago: | 05/2018 | \$551.15 |
| 3 Months Ago: | 06/2018 | \$551.15 |
| 2 Months Ago: | 07/2018 | \$551.15 |
| Last Month: | 08/2018 | \$551.15 |
| | Average per month: | \$551.15 |
| | | |

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Debtor 1 Debtor 2 Christina Mae Purvis Case number (if known)

Current Monthly Income Details for the Debtor's Spouse

Spouse Income Details:

Income for the Period 03/01/2018 to 08/31/2018.

Non-CMI - Social Security Act Income

Source of Income: U.S. Government

Income by Month:

| 6 Months Ago: | 03/2018 | \$1,903.90 |
|---------------|--------------------|------------|
| 5 Months Ago: | 04/2018 | \$1,903.90 |
| 4 Months Ago: | 05/2018 | \$1,903.90 |
| 3 Months Ago: | 06/2018 | \$1,903.90 |
| 2 Months Ago: | 07/2018 | \$1,903.90 |
| Last Month: | 08/2018 | \$1,903.90 |
| | Average per month: | \$1,903.90 |

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

| Chapter 7: | Liquidation |
|------------|--------------------|
| \$245 | filing fee |
| \$75 | administrative fee |
| + \$15 | trustee surcharge |
| \$335 | total fee |

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes:

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

\$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

| | \$200 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$275 | total fee |

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

| | \$235 | filing fee |
|---|-------|--------------------|
| + | \$75 | administrative fee |
| | \$310 | total fee |

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.